



Medi-Cal

June 2024 | San Diego مقاطعة



Promise Health Plan



Promise Health Plan

LANGUAGE ASSISTANCE NOTICE

ATTENTION: If you need help in your language call 1-855-699-5557 (TTY: 711). Aids and services for people with disabilities, like documents in braille and large print, are also available. Call 1-855-699-5557 (TTY: 711). These services are free of charge.

الشعار بالعربية (Arabic) يُرجى الانتباه: إذا احتجت إلى المساعدة بلغتك، فاتصل بـ 1-855-699-5557 (TTY: 711). تتوفر أيضًا المساعدات والخدمات للأشخاص ذوي الإعاقة، مثل المستندات المكتوبة بطريقة برييل والخط الكبير. اتصل بـ 1-855-699-5557 (TTY: 711). هذه الخدمات مجانية.

Հայերեն պիտակ (Armenian) ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե Ձեզ օգնություն է հարկավոր Ձեր լեզվով, զանգահարեք 1-855-699-5557 (TTY՝ 711) հեռախոսահամարով: Կան նաև օժանդակ միջոցներ ու ծառայություններ հաշմանդամություն ունեցող անձանց համար, օրինակ Բրայլի գրատիպով ու խոշորատառ տպագրված նյութեր: Չանգահարեք 1-855-699-5557 (TTY՝ 711) հեռախոսահամարով: Այդ ծառայություններն անվճար են:

ប្រាសាទកម្ពុជា (Cambodian) ចំណាំ: បើសិនអ្នកត្រូវការជំនួយ ជាភាសារបស់អ្នក សូមទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY: 711) ។ ជំនួយ និងសេវា សំរាប់ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរព្រីល សំរាប់ជនពិការភ្នែក ឬឯកសារជាអក្សរព្រីលធំៗ ក៏មានដែរ។ ទូរស័ព្ទមកលេខ 1-855-699-5557 (TTY: 711)។ សេវាទាំងនេះមិនគិតថ្លៃឡើយ។

简体中文标语 (Chinese) 请注意: 如果您需要以您的母语提供帮助, 请致电 1-855-699-5557 (TTY: 711)。另外还提供针对残疾人士的帮助和服务, 例如文盲和需要较大字体阅读, 也是方便取用的。请致电 1-855-699-5557 (TTY: 711)。这些服务都是免费的。

مطلب به زبان فارسی (Farsi) توجه: اگر میخواهید به زبان خود کمک دریافت کنید, با 1-855-699-5557 (TTY: 711) تماس بگیرید. کمکها و خدمات مخصوص افراد دارای معلولیت, مانند نسخه های خط بریل و چاپ با حروف بزرگ, نیز موجود است. با 1-855-699-5557 (TTY: 711) تماس بگیرید. این خدمات رایگان ارائه میشوند.

हिन्दी टैगलाइन (Hindi) ध्यान दें: अगर आपको अपनी भाषा में सहायता की आवश्यकता है तो 1-855-699-5557 (TTY: 711) पर कॉल करें। अशक्तता वाले लोगों के लिए सहायता और सेवाएं, जैसे ब्रेल और बड़े प्रिंट में भी दस्तावेज़ उपलब्ध हैं। 1-855-699-5557 (TTY: 711) पर कॉल करें। ये सेवाएं नि:शुल्क हैं।

Nge Lus Hmoob (Hmong) Cob CEEB TOOM: Yog koj xav tau kev pab txhais koj hom lus hu rau 1-855-699-5557 (TTY: 711). Muaj cov kev pab txhawb thiab kev pab cuam rau cov neeg xiam oob qhab, xws li puav leej muaj ua cov ntawv su thiab luam tawm ua tus ntawv loj. Hu rau 1-855-699-5557 (TTY: 711). Cov kev pab cuam no yog pab dawb xwb.

日本語表記 (Japanese) 注意日本語での対応が必要な場合は 1-855-699-5557 (TTY: 711) へお電話ください。点字の資料や文字の拡大表示など、障がいをお持ちの方のためのサービスも用意しています。1-855-699-5557 (TTY: 711) へお電話ください。これらのサービスは無料で提供していますへお電話ください。これらのサービスは無料で提供しています。

한국어 태그라인 (Korean) 유의사항: 귀하의 언어로 도움을 받고 싶으시면 1-855-699-5557 (TTY: 711)번으로 문의하십시오. 점자나 큰 활자로 된 문서와 같이 장애가 있는 분들을 위한 도움과 서비스도 이용 가능합니다. 1-855-699-5557 (TTY: 711) 번으로 문의하십시오. 이러한 서비스는 무료로 제공됩니다.

ແທກໂລພາສາລາວ (Laotian) ປະກາດ: ຖ້າທ່ານຕ້ອງການຄວາມຊ່ວຍເຫຼືອໃນພາສາຂອງທ່ານໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ອັງ ມີຄວາມຊ່ວຍເຫຼືອແລະການບໍລິການສໍາລັບຄົນພິການ ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕຮິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

Mienh Tagline (Mien) LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiemx longc mienh tengx faan benx meih nyei waac nor douc waac daaih lorx taux 1-855-699-5557 (TTY: 711). Liouh lorx jauv-louc tengx aengx caux nzie gong bun taux ninh mbuo wuaaic fangx mienh, beiv taux longc benx nzangc-pokc bun hluo mbiutc aengx caux aamz mborqv benx domh sou se mbenc nzoih bun longc. Douc waac daaih lorx 1-855-699-5557 (TTY: 711). Naaiv deix nzie weih gong-bou jauv-louc se benx wang-henh tengx mv zuqc cuotv nyaanh oc.

ਪੰਜਾਬੀ ਟੈਗਲਾਈਨ (Punjabi) ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਾਲ ਕਰੋ 1-855-699-5557 (TTY: 711) | ਆਚਰਜ ਲੇਕਾਂ ਲਈ ਸਹਾਇਤਾ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬ੍ਰੇਲ ਅਤੇ ਮੋਟੀ ਛਪਾਈ ਵਿੱਚ ਦਸਤਾਵੇਜ਼, ਵੀ ਉਪਲਬਧ ਹਨ। ਕਾਲ ਕਰੋ 1-855-699-5557 (TTY: 711) | ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।

Русский слоган (Russian) ВНИМАНИЕ! Если вам нужна помощь на вашем родном языке, звоните по номеру 1-855-699-5557 (линия TTY: 711). Также предоставляются средства и услуги для людей с ограниченными возможностями, например документы крупным шрифтом или шрифтом Брайля. Звоните по номеру 1-855-699-5557 (линия TTY: 711). Такие услуги предоставляются бесплатно.

Mensaje en español (Spanish) ATENCIÓN: Si necesita ayuda en su idioma, llame al 1-855-699-5557 (TTY: 711). Para las personas con discapacidades, también hay asistencia y servicios gratuitos disponibles, como documentos en braille y letra grande. Llame al 1-855-699-5557 (TTY: 711). Estos servicios son gratuitos.

Tagalog Tagline PAUNAWA: Kung kailangan ninyo ng tulong sa inyong wika, tumawag sa 1-855-699-5557 (TTY: 711). Mayroon ding mga tulong at serbisyo para sa mga taong may kapansanan, tulad ng mga dokumento sa braille at malalaking titik. Tumawag sa 1-855-699-5557 (TTY: 711). Libre ang mga serbisyong ito.

แท็กไลน์ภาษาไทย (Thai) โปรดทราบ: หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ กรุณาโทรศัพท์ไปที่หมายเลข 1-855-699-5557 (TTY: 711) นอกจากนี้ ยังพร้อมให้ความช่วยเหลือและบริการต่าง ๆ สำหรับบุคคลที่มีความพิการ เช่น เอกสารต่าง ๆ ที่เป็นอักษรเบรลล์และเอกสารที่พิมพ์ด้วยตัวอักษรขนาดใหญ่ กรุณาโทรศัพท์ไปที่หมายเลข 1-855-699-5557 (TTY: 711) ไม่มีค่าใช้จ่ายสำหรับบริการเหล่านี้

Примітка українською (Ukrainian) УВАГА! Якщо вам потрібна допомога вашою рідною мовою, телефонуйте на номер 1-855-699-5557 (TTY: 711). Люди з обмеженими можливостями також можуть скористатися допоміжними засобами та послугами, наприклад, отримати документи, надруковані шрифтом Брайля та великим шрифтом. Телефонуйте на номер 1-855-699-5557 (TTY: 711). Ці послуги безкоштовні.

Khẩu hiệu tiếng Việt (Vietnamese) CHÚ Ý: Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi số 1-855-699-5557 (TTY: 711). Chúng tôi cũng hỗ trợ và cung cấp các dịch vụ dành cho người khuyết tật, như tài liệu bằng chữ nổi Braille và chữ khổ lớn (chữ hoa). Vui lòng gọi số 1-855-699-5557 (TTY: 711). Các dịch vụ này đều miễn phí.

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A. المقدمة

شكراً لاختياركم Blue Shield of California Promise Health Plan. يوفر لك دليل مقدم الخدمة قوائم العيادات والأطباء والمستشفيات والصيدليات، وأنواع مقدمي الرعاية الآخرين الذين يعدون جزءاً من Blue Shield Promise Health Plan.

1-800-977-2273

لا ترم بطاقة (BIC) Medi-Cal التعريفية. ستحتاج إلى استخدام بطاقة (BIC) Medi-Cal عند زيارة طبيب أسنان Medi-Cal الخاص بك، وكذلك للحصول على خدمات الرعاية الصحية الأخرى التي تغطيها Blue Shield of California Promise Health Plan.

عند انضمامك إلى Blue Shield of California Promise Health Plan، فإنه من المهم اختيار طبيب رعاية أولية (PCP) لكل عضو. وإذا لم تقم باختيار طبيب لنفسك، فستقوم Blue Shield Promise باختيار طبيب من أجلك. سوف يكون طبيب PCP الخاص بك هو الطبيب الذي ستذهب إليه للحصول على الرعاية الوقائية وعندما تكون مريضاً. كما سيقوم طبيب PCP بتوجيهك إلى طبيب متخصص أو مقدم خدمات متخصص آخر عند الحاجة. إن طبيب PCP موجود لتلبية احتياجات الرعاية الصحية الخاصة بك والعمل مع الأعضاء للحفاظ على صحتهم.

تغيير طبيب PCP الخاص بك

يمكنك تغيير طبيب الرعاية الأولية (PCP) المسؤول عنك في أي وقت من خلال الاتصال بخدمة رعاية العملاء لدى Blue Shield Promise [TTY: 711] 699-5557 (855). لن تكون التغييرات سارية حتى اليوم الأول من الشهر التالي. كما يمكنك أيضاً زيارة موقعنا الإلكتروني blueshieldca.com/promise.

بصفتك عضواً في Blue Shield of California Promise Health Plan، سوف تحصل على بطاقة تعريفية للعضوية مثل البطاقة المصورة في هذه الصفحة. وسوف تحتاج إلى إظهار هذه البطاقة التعريفية في كل مرة تقوم فيها بزيارة الطبيب، أو عند الحصول على الوصفات الطبية (الأدوية)، أو عند استخدام غرفة الطوارئ، أو عند زيارة طبيب العيون الخاص بك. احتفظ بهذه البطاقة معك في جميع الأوقات.

عندما تحصل على البطاقة التعريفية الخاصة بك، يُرجى

	Member: JOHN DOE Member ID: AAA123456789
CIN: 123456789 Health Plan Group #: E0001001	Information: Information Line 2
Effective Date: MM/DD/YYYY	PCP Name: Phone Number: 1234 Street City, ST: Zip:

بطاقة تعريف الدرع الأزرق (BIC) Blue Shield

الخدمات الصيدلانية من خلال Medi-Cal Rx

، DHCS) Department of Health Care Services قسم خدمات الرعاية الصحية) يدير الخدمات الصيدلانية لأعضاء Medi-Cal. للخدمات الصيدلانية، يمكنك الاتصال على خط مركز الاتصال الخاص بـ Medi-Cal Rx على الرقم 1-800-977-2273 على مدار 24 ساعة طوال أيام الأسبوع، أو اتصل بـ TTY على رقم 711، من الإثنين إلى الجمعة، من الساعة 8 صباحاً حتى 5 مساءً.

تقبل معظم الصيدليات بـ Medi-Cal Rx. يمكنك الاتصال على خط مساعدة أعضاء Medi-Cal على الرقم (1-800-541-5555, TTY 1-800-430-7077) للاستفسار عما إذا كانت الصيدلية التي تتعامل معها تقبل بـ Medi-Cal Rx. إذا احتجت إلى المساعدة في البحث عن صيدلية، استخدم أداة البحث عن صيدليات Medi-Cal Rx عبر الإنترنت على الموقع الإلكتروني www.Medi-CalRx.dhcs.ca.gov أو اتصل على خط مركز الاتصال الخاص بـ Medi-Cal Rx على الرقم

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفصّل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

التأكد من صحة البيانات المدونة. وإن كانت خاطئة، اتصل
بخدمة رعاية العملاء Blue Shield of California
Promise Health Plan على رقم **699-5557 (855)**.

المتخصصين والمستشفيات ومقدمي الدعم الآخرين،
بحسب الترتيب الأبجدي لاسم المدينة. ستجد في قسم
"شبكة مقدمي الخدمة Blue Shield Promise" معلومات
حول كيفية قراءة الأقسام المدرجة لمقدم الخدمة والعثور
علي المعلومات المهمة التي تحتاج إلى معرفتها عن كل
مقدم خدمة.

دليل مقدمي الخدمات لدى Blue Shield Promise

San Diego - مقاطعة

Diego

توفر Blue Shield Promise الوصول الكامل والمتساوي
إلى الخدمات المشمولة، بما في ذلك المسجلون ذوو
الإعاقة. يتم تقديم جميع مقدمي الخدمات، كما يجب عليهم
إكمال تدريب الكفاءة الثقافية.

خدمات الترجمة الفورية

لتسهيل الأمر عليك قامت Blue Shield Promise بتوفير:

- طاقم عمل ثنائي اللغة لمساعدتك بلغتك.
- خدمات الترجمة الفورية، بما في ذلك لغة الإشارة
الأمريكية، دون أي تكلفة وذلك لتلبية جميع احتياجات
الرعاية الصحية الخاصة بك. لست بحاجة إلى أن تطلب
مساعدة أصدقائك أو أفراد عائلتك ليترجموا لك. يمكنك
الحصول على خدمات الترجمة الفورية على مدار 24
ساعة في اليوم، 7 أيام في الأسبوع لكل مما يلي:
- ✓ الخدمات الطبية: زيارات الطبيب، وخدمات بعد
ساعات العمل، وخدمات الرعاية العاجلة،
وخدمات الصيدلة، ودروس الشقيف الصحي.
- ✓ الخدمات غير الطبية: خدمة العملاء وشكاوى
الأعضاء والاجتماعات التوجيهية للأعضاء.
- ✓ مواد بتسيقات أخرى، مثل برايل للمكفوفين أو
الملفات الصوتية أو الملفات المطبوعة بحجم
كبير.

كل ما عليك القيام به هو الاتصال بمجموعتك الطبية أو
بخدمة رعاية العملاء Blue Shield Promise للحصول
على مواعيد محددة، تأكد من طلب مترجم فوري قبل
عشرة (10) أيام عمل على الأقل من موعدك.

معلومات مهمة عن قوائم الدليل

يتم تحديث دليل مقدمي الخدمات هذا وفقًا للتاريخ المدرج
على الغلاف الأمامي. قد تتم إضافة أو إزالة بعض أطباء
PCP بعد طباعة هذا الدليل. ولا يمكننا ضمان استقبال
أعضاء جدد من قبل كل طبيب PCP. للحصول على آخر
المعلومات حول بيانات أطباء PCP في منطقتك، يمكنك
زيارة الرابط blueshieldca.com/promise أو الاتصال
بخدمات أعضاء Blue Shield Promise على الرقم
المجاني

[711: TTY] **699-5557 (855)**.

أو عن طريق زيارة مكتبنا من الاثنين إلى الجمعة من
الساعة 8 صباحًا حتى 6 مساءً. وبممكنك الحضور دون
موعد مسبق لدينا طاقم عمل يتحدث لغتك. كما يمكنك
أيضًا زيارة موقعنا الإلكتروني

blueshieldca.com/promise.

معلومات وإفصاحات مهمة أخرى

لا يقدم بعض مقدمي الخدمات والمستشفيات واحدة أو
أكثر من الخدمات التالية التي قد تشملها الخطة الصحية
الخاصة بك التي ربما قد تحتاجها مثل تنظيم الأسرة أو
تنظيم النسل، بما في ذلك حالات طوارئ تنظيم النسل، أو
الإخصاء بما في ذلك عملية ربط الأنابيب وقت المخاض
والولادة أو علاج العقم أو الإجهاض. اتصل على هاتف
خدمات أعضاء Blue Shield Promise على الرقم
699-5557 (855) للتأكد من أنه يمكنك الحصول على
خدمات الرعاية الصحية التي تحتاج إليها.

لمزيد من المعلومات حول مقدمي الخدمة الخاصين بنا،
بما في ذلك شهاداتهم الدراسية وخبرتهم (مثل الكليات
الطبية التي درسوا فيها، وتدريب الأطباء المقيمين وحالة
الإجازة من مجلس الاختصاص)، يمكنك الاتصال بخدمة
رعاية العملاء Blue Shield Promise، أو استخدم أداة
البحث عن مقدم الرعاية المتوافرة على موقعنا الإلكتروني

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

.blueshieldca.com/promise

قد تحتاج إلى ترخيص أو إحالة للوصول إلى بعض مقدمي الخدمات.

كيفية استخدام هذا الدليل:

يمكنك استخدام دليل مقدم الخدمة هذا لاختيار طبيب PCP المتعاقد مع Blue Shield Promise. يتم إدراج أسماء أطباء PCP، مع مقدمي الخدمات

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضّل بالزيارة عبر الإنترنت على [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

إشعار عدم التمييز

تعد ممارسة التمييز العنصري مخالفة للقانون. تلتزم Blue Shield of California Promise Health Plan بقوانين الحقوق المدنية للولايات وقوانين الحماية المدنية الفيدرالية، ولا تمارس Blue Shield of California Promise Health Plan التمييز بشكل غير قانوني ولا تستبعد أشخاصًا أو تفرق بينهم في المعاملة على أساس الجنس أو العرق أو اللون أو الدين أو النسب أو الأصل القومي أو تحديد المجموعة العرقية أو السن أو الإعاقة العقلية أو الجسدية أو الحالة الطبية أو المعلومات الجينية أو الحالة الاجتماعية أو النوع أو الهوية الجنسية أو الميول الجنسية.

تقدم خطة Blue Shield of California Promise Health Plan ما يلي:

- مساعدات وخدمات مجانية للأشخاص ذوي الإعاقات لمساعدتهم في التواصل بشكل أفضل، مثل:

✓ مترجمو لغة إشارة أكفاء

- ✓ معلومات مكتوبة بتنسيقات مختلفة (كأن تكون مطبوعة بأحرف كبيرة، أو مسجلة صوتيًا، أو تنسيقات إلكترونية يسهل الوصول إليها أو تنسيقات أخرى)

- خدمات لغوية مجانية للأشخاص الذين لا يتحدثون الإنجليزية كلغة أساسية، مثل:

✓ مترجمون فوريون أكفاء

✓ معلومات مكتوبة بلغات مختلفة

إذا كنت بحاجة إلى هذه الخدمات، يرجى التواصل مع Blue Shield of California Promise Health Plan من الساعة 8 صباحًا وحتى الساعة 6 مساءً، من الاثنين إلى الجمعة. اتصل بخدمة العملاء في منطقتك:

(Los Angeles) (800) 605-2556

(San Diego) (855) 699-5557

إذا كنت تعاني من صعوبات في السمع أو التحدث، يُرجى الاتصال بـ **TTY: 711**. يمكننا حال الطلب، توفير هذا المستند لك بلغة برايل، أو طباعته بأحرف كبيرة، أو تسجيله على شريط صوتي، أو في صورة نسخة إلكترونية. للحصول على نسخة في صورة أي من هذه التنسيقات البديلة، يرجى الاتصال أو مراسلة:

Blue Shield of California Promise Health Plan

Customer Care

3840 Kilroy Airport Way, Long Beach, CA 90806

(Los Angeles) (800) 605-2556

(San Diego) (855) 699-5557

TTY: 711

كيفية تقديم تظلم

إذا كنت تعتقد أن Blue Shield of California Promise Health Plan قد أخفقت في تقديم تلك الخدمات أو مارست التمييز بطريقة أخرى على أساس الجنس أو العرق أو اللون أو الدين أو السلالة أو الأصل القومي أو تحديد المجموعة العرقية أو العمر أو الإعاقة العقلية أو الجسدية أو الحالة الطبية أو المعلومات الجينية أو الحالة الاجتماعية أو النوع أو الهوية الجنسية أو الميول الجنسية، يمكنك تقديم تظلم إلى منسق الحقوق المدنية لدى Blue Shield of California Promise Health Plan. ويمكنك تقديم التظلم عن طريق الهاتف أو كتابيًا أو شخصيًا أو إلكترونيًا:

- عن طريق الهاتف: اتصل بمنسق الحقوق المدنية لدى Blue Shield of California Promise Health Plan من الساعة 8 صباحًا وحتى الساعة 6 مساءً، من الاثنين إلى الجمعة على الرقم (844) 883-2233. أو إذا كنت لا تستطيع السماع أو التحدث بشكل جيد، يُرجى الاتصال على TTY/TDD 711.

- كتابياً: املأ نموذج شكوى أو اكتب خطاباً وأرسله إلى:

Blue Shield of California Promise Health Plan Civil Rights Coordinator
3840 Kilroy Airport Way, Long Beach, CA 90806

- شخصياً: تفضل بزيارة عيادة طبيبك أو Blue Shield of California Promise Health Plan واذكر رغبتك في تقديم تظلم.
- إلكترونياً: تفضل بزيارة الموقع الإلكتروني لـ Blue Shield of California Promise Health Plan عبر الرابط www.blueshieldca.com/promise/medi-cal.

**مكتب الحقوق المدنية (OFFICE OF CIVIL RIGHTS) – إدارة خدمات الرعاية الصحية بولاية كاليفورنيا
(CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES)**

يمكنك أيضاً تقديم شكوى حقوق مدنية لدى مكتب الحقوق المدنية بإدارة خدمات الرعاية الصحية بولاية كاليفورنيا، عبر الهاتف أو كتابياً أو إلكترونياً:

- عن طريق الهاتف: اتصل على الرقم **916-440-7370**. إذا لم يكن بمقدورك التحدث أو السماع جيداً، يُرجى الاتصال على **711 (خدمة ترحيل الاتصالات)**.

- كتابياً: املأ نموذج الشكاوى أو أرسل خطاباً إلى:

**Deputy Director, Office of Civil Rights
Department of Health Care Services**

P.O. Box 997413, MS 0009 Sacramento, CA 95899-7413

إن نماذج تقديم الشكاوى متاحة على http://www.dhcs.ca.gov/Pages/Language_Access.aspx

- إلكترونياً: يمكنك إرسال بريداً إلكترونياً إلى CivilRights@dhcs.ca.gov.

**مكتب الحقوق المدنية - وزارة الصحة والخدمات الإنسانية بالولايات المتحدة
(U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES)**

إذا كنت تعتقد أنك تعرضت للتمييز على أساس العرق أو اللون أو الأصل القومي أو السن أو الإعاقة أو الجنس، يمكنك أيضاً التقدم بشكوى بشأن الحقوق المدنية إلى وزارة الصحة والخدمات الإنسانية بالولايات المتحدة، مكتب الحقوق المدنية هاتفياً أو كتابياً أو إلكترونياً:

- عن طريق الهاتف: اتصل على الرقم **1-800-368-1019**. إذا كنت لا تستطيع التحدث أو السماع بشكل جيد، يُرجى الاتصال على **(TTY/TDD) 1-800-537-7697**.

- كتابياً: املأ نموذج الشكاوى أو أرسل خطاباً إلى:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

تتوفر نماذج الشكاوى على <http://www.hhs.gov/ocr/office/file/index.html>

- إلكترونياً: يرجى زيارة البوابة الإلكترونية لمكتب شكاوى الحقوق المدنية على الموقع الإلكتروني <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

شبكة مقدّمي خدمات Blue Shield Promise

تعريفات ومعلومات عامة

مفتاح دليل مقدّم الخدمة

- * | مقدّم الخدمة لا يقبل مرضى جدداً في هذه الشبكة الصحية
- 📍 | عنوان مقدّم الخدمة
- ☎️ | رقم هاتف مقدّم الخدمة
- 🕒 | رقم هاتف مقدّم الخدمة بعد ساعات العمل
- 🗣️ | اللغة المستخدمة في مكتب مقدّم الخدمة هذا
- 🕒 | ساعات عمل مقدّم الخدمة بسهولة
- 📱 | الوصول للمعلومات الموقع الإلكتروني
- 📧 | الخاص بمقدّم الخدمة

العيادة المجتمعية: هي عيادة طبية غير ربحية تقدم خدمات الرعاية الصحية لأعضاء Blue Shield Promise.

الطبيب العام وطبيب الأسرة: هم الأطباء المتخصصون في علاج الأطفال والبالغين من الرجال والنساء.

مركز صحي مؤهل اتحادياً (FQHC): هو منظمة مجتمعية توفر خدمات الرعاية الصحية الأولية والوقائية للأشخاص من جميع الفئات العمرية، دون النظر لإحالتهم المادية أو وضعهم في التأمين الصحي.

المستشفى: لدى Blue Shield Promise تعاقدات مع العديد من المستشفيات. تحقق من انتساب طبيب الرعاية الأولية الذي قمت باختياره إلى المستشفى.

الطب الباطني: هم الأطباء المتخصصون في علاج البالغين من الرجال والنساء فوق سن 18 عاماً.

رابطة الأطباء المستقلين (IPA): هو مركز الرعاية الصحية الذي تعاقد مع مجموعة من الأطباء لتقديم خدمات الرعاية الصحية.

المجموعة الطبية: مجموعة أطباء يقدمون خدمات الرعاية الصحية لأعضاء Blue Shield Promise.

طب التوليد وطب النساء: هم الأطباء المتخصصون في مجال صحة المرأة ورعاية الأمومة.

طب الأطفال: هم الأطباء المتخصصون في علاج الأطفال حتى سن 18 عاماً.

طبيب الرعاية الأولية (PCP): بصفتك عضواً في Blue Shield Promise، يجب أن تختار PCP لتلبية احتياجاتك الصحية العامة. إذا لم تقم باختيار PCP خاص بك، فسنقوم نحن باختيار طبيب لك. جميع أطباء PCP مصنّفون حسب المدينة. يمكنك اختيار أي من اختصاصات الأطباء التالية:

- طب التوليد وطب النساء
- طبيب أطفال

- الطبيب العام وطبيب الأسرة
- الطب الباطني

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضّل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

مؤشر إمكانية الوصول المادي لدليل مقدّم الخدمة

يمكنك العثور أدناه على معلومات حول احتياجات الوصول الأساسية لكبار السن والأشخاص ذوي الإعاقة (SPD) عند زيارة عيادة طبيب. نحن بدورنا نعلم أن للأعضاء احتياجات مختلفة. لذلك، نطلب من الأعضاء الاتصال بعيادة الطبيب لمناقشة احتياجات الوصول الخاصة بهم.

(Parking) P = موقف السيارات

توجد أماكن لوقوف السيارات، وأماكن مخصصة لوقوف سيارات النقل المغلقة، وجميعها سهلة الوصول. تتميز الممرات بمنحدرات أرضية بين مواقف السيارات والمكاتب ونقاط النزول.

(Restroom) R = المراحيض

أبواب المراحيض الوصول إليها سهل ويمكن فتحها بسهولة وهي واسعة بدرجة كافية لدخول الكرسي المتحرك أو الدراجة الصغيرة. يتميز المراحيض بمساحة كافية تسمح لمستخدمي الكرسي المتحرك أو الدراجة الصغيرة الدوران وإغلاق الباب. يوجد قضبان استناد تسمح بسهولة الانتقال من الكرسي المتحرك/ الدراجة إلى المراحيض. يمكن بسهولة الوصول إلى الحوض وكذلك الحنفيات والصابون ومناديل المراحيض واستخدامها.

(Exam Table/Scale) T = كرسي الفحص/ الميزان

تتحرك طاولة الفحص إلى الأعلى وإلى الأسفل، ويمكن الوصول إلى الميزان بسهولة مع وجود درابزين لمساعدة مستخدمي الكراسي المتحركة والدراجات الصغيرة. يمكن للميزان استيعاب كرسي متحرك.

(Exam Room) E = غرفة الفحص

المدخل المؤدي إلى غرفة الفحص سهل ومحدد بمسار واضح. الأبواب مفتوحة على اتساعها، بحيث تكفي المساحة لدخول كرسي متحرك أو دراجة صغيرة، كما أنها سهلة الفتح. تتميز غرفة الفحص بمساحة كبيرة بما يكفي لتسع كرسيًا متحركًا أو دراجة صغيرة.

(Exterior Building) EB = المبنى الخارجي

منحدرات الرصيف وغيرها من المنحدرات المؤدية إلى المبنى واسعة بما يكفي لممر كرسي متحرك أو دراجة صغيرة. يوجد درابزين على جانبي المنحدر. يوجد مدخل "سهل الوصول" إلى المبنى. الأبواب مفتوحة على اتساعها بما يكفي لدخول مستخدمي الكرسي المتحرك أو دراجة الصغيرة، فضلاً عن أنها مقدمة بمقابض سهلة الاستخدام.

(Interior Building) IB = المبنى الداخلي

الأبواب مفتوحة على اتساعها بما يكفي لدخول مستخدمي الكرسي المتحرك أو دراجة الصغيرة، فضلاً عن أنها مقدمة بمقابض سهلة الاستخدام. المنحدرات الداخلية واسعة بشكل كافٍ ولها درابزين. في حال وجود سلالم فهي ستكون مجهزة بدرابزين. في حال وجود مصعد، سيكون استخدامه متاحًا للعموم/ المرضى في جميع الأوقات التي يكون فيها المبنى مفتوحًا. المصعد مجهز بأصوات واضحة وأزرار بربل للمكفوفين موجودة في متناول اليد. يحتوي المصعد على مساحة كافية لمستخدمي الكرسي المتحرك أو مستخدمي الدراجة الصغيرة حتى يتمكنوا من تغيير اتجاه حركتهم. يمكن استخدام رافعة المنصة دون الحاجة إلى مساعدة، في حال وجودها.

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضّل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

توضيح رمز إمكانية الوصول



موقف السيارات	P
المبنى الخارجي	EB
المبنى الداخلي	IB
الكرسي المتحرك	W
المرحاض	R
غرفة الفحص	E
طاولة/ميزان الفحص	T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضّل بالزيارة عبر الإنترنت على [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

كيفية قراءة قائمة مقدّم الخدمة

مثلاً:

من شأن المعلومات التالية أن تقوم بمساعدتك على اختيار PCP الخاص بك.

1. التخصص الطبي لمقدّم الخدمة
 2. اسم مقدّم الخدمة، نوع الرخصة
 3. رقم البطاقة التعريفية لمقدّم الخدمة
 4. جنس مقدّم الخدمة
 5. رقم الرخصة الخاصة بمقدّم الخدمة
 6. رقم NPI (معرف مقدم الرعاية الوطني) لمقدّم الخدمة
 7. اللغات التي يتحدث بها مقدمو الخدمة والموظفون
 8. تدريب الكفاءة الثقافية
 9. الانتساب إلى المستشفى
 10. التخصص المعتمد:
 11. اسم المجموعة الطبية FQHC/اسم المجموعة الطبية
 12. عنوان مقدّم الخدمة
 13. رقم هاتف مقدّم الخدمة
 14. رقم فاكس مقدّم الخدمة
 15. الموقع الإلكتروني الخاص بمقدّم الخدمة
 16. عنوان البريد الإلكتروني لمقدّم الخدمة
 17. Medi-Cal Open Panel:
 18. حد السن الأدنى والأقصى:
 19. إمكانية الوصول للأشخاص ذوي الإعاقة
 20. ساعات عمل مقدّم الخدمة
1. طبيب أطفال
 2. Doe, Jane, MD
 3. الرقم التعريفي لمقدّم الخدمة: 00A2123456
 4. أنثى
 5. رقم الرخصة 00A123456
 6. NPI: 0123456789
 7. الإنجليزية، الإسبانية، الفيتنامية، الفارسية، الكورية، الصينية، العربية.
 8. نعم
 9. Good Samaritan Hospital
 10. طبيب أطفال
 11. Northeast County Community Clinic
 12. 601 Potrero Grande Drive, Monterey Park, CA 91755
 13. (855) 699-5557
 14. (855) 699-5557
 15. www.northeastclinic.com
 16. doctordoe@gmail.com
 17. نعم/لا
 18. 0-18
 19. محدود. P, EB, IB, E
 20. الإثنين - الجمعة، الساعة 8 ص - 5 م

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضّل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

الوصول إلى معايير الرعاية في الوقت المناسب

نوع الموعد	يجب تحديد الموعد خلال
مواعيد الرعاية العاجلة التي لا تتطلب موافقة سابقة (تصريح سابق)	48 ساعة
مواعيد الرعاية العاجلة التي تتطلب موافقة سابقة (تصريح سابق)	96 ساعة
مواعيد الرعاية الصحية الأولية غير العاجلة	10 أيام عمل
المواعيد غير العاجلة لزيارة اختصاصي	15 أيام عمل
مقدم خدمة الصحة العقلية غير العاجلة (غير طبيب).	10 أيام عمل
تحديد موعد للخدمات المعاونة غير العاجلة لتشخيص أو علاج إصابة أو مرض أو أي حالة صحية أخرى	15 أيام عمل
وقت الانتظار على الهاتف خلال ساعات العمل العادية	10 دقيقة
فرز المرضى – على مدار الساعة وطوال أيام الأسبوع	على مدار الساعة وطوال أيام الأسبوع – لا تزيد على 30 دقيقة

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضّل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

This Doula Provider Directory is an addendum to the Blue Shield of California Promise Health Plan Provider Directory.

San Diego:

- 1. Brittany Negrete**
Phone #: 619-817-5901
- 2. Jessi Hughes**
Phone #: 619-206-4467
- 3. Joy Dunn Hurley**
Phone #: 619-277-1094
- 4. Angela Gordon-Nichols**
Phone #: 951-524-8876
- 5. Marisa Tervoort**
Phone #: 909-553-4616
- 6. Casey Hetzel-Ramos**
Phone #: 858-247-0009
- 7. For The Village, Inc.**
Phone #: 619-657-3384
Rendering Doulas Names:
Isabel Shawel
Leslie Meza
Lexus Carter
Allyson Coughenor
Elyde Arroyo
Jamaica Rich
Erikka Thorpe
- 8. Latania Knox**
Phone #: 619-248-1378
- 9. Frances Ayalasomayajula**
Phone #: 619-800-6443
- 10. The Wingwomen Inc.**
Phone #: 800-491-2142
Rendering Doulas Names:
Adonica Shaw
Natalie Jaconetty
Connaitre Tillman
Talitha Cumi Mcgirt
- 11. National Doula Network**
Phone #: 877-436-8527
Rendering Doulas Names:
Candace Caballero
Pamela Serna
Ellen Branch
Priscilla, Hsu
Amanda, Mcnair-Robinson
Brittany Negrete
Jasmin Castillo
LeeArtric Walker
Michelle Brenhaug

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None






Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM

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SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.mtnhealth.org

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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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.mtnhealth.org

BORREGO SPRINGS

BORREGO MEDICAL CLINIC

Provider ID: 185179
 4343 YAQUI PASS RD BORREGO SPRINGS, CA 92004
 Phone: 760-767-5051
 After Hours Phone: 760-767-5051
 License Number: C39104
 NPI: 1134144165
 Accepting New Patients: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

BORREGO MEDICAL CLINIC

Provider ID: 185179

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:
760-767-5051

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

BORREGO MEDICAL CLINIC

Provider ID: 185179

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:
760-767-5051

License Number: 80000651

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: Yes

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

BORREGO MEDICAL CLINIC

Provider ID: 185179

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:
760-767-5051

License Number: G85319

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FOUNDTION


 Website: N/A


CAMPO

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:
619-445-6200


License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: N/A

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:
619-445-6200

License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906-2028


 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906-2028

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A18400

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

📍 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906-2028

☎ Phone: 619-662-4100

📞 After Hours Phone: 619-662-4100

License Number: 90000660

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

📍 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906-2028

☎ Phone: 619-662-4100

📞 After Hours Phone: 619-662-4100

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

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

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

TRUECARE

Provider ID: 480120

📍 1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ Phone: 760-736-6767

🕒 After Hours Phone:
760-736-6767

License Number: A49273

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

🗨 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

🗨 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

🗨 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

🗨 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: 20A11535

NPI: 1134155377

Accepting New Patients: Yes



Min/Max Age: 0\None

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish






Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.







FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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: A108228
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا






CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:

Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO







 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






B. العيادات الصحية المؤهلة فيدرالياً

 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes

 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):









N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes

 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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: NP10943
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR



Provider ID: 206355


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: NP95001492
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 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
Min/Max Age: 0\None


 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 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
Min/Max Age: 0\None



 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM





اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



B. العيادات الصحية المؤهلة فيدرالياً

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM









American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes

 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: FAMILY
 HEALTH CENTERS OF SAN
 DIEGO
 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: PT37189
 NPI: 1134155377
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
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

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: www.fhcsd.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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-4:00PM
MO 9:00AM-4:00PM
TU 9:00AM-4:00PM
WE 9:00AM-4:00PM
TH 9:00AM-4:00PM
FR 9:00AM-4:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: A82912

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

After Hours Phone:

619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC





Provider ID: 417641



352 L ST

CHULA VISTA, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً



91911-1208
 Phone: 619-515-2325
 After Hours Phone:
619-515-2325
License Number: PA19306
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا


SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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: 20A11087

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: 20A19485
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None






Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




B. العيادات الصحية المؤهلة فيدراليًا



SA 8:00AM-5:00PM
American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM




American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM




American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org


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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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: A115699

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

619-662-4100
License Number: A120672
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N








♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA




Provider ID: 427322

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً






 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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








Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM

SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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: A138474
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدرالياً .B

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No



Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):






N



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا






 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *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
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *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
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM



American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM*
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *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
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-5:00PM*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA VISTA**


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A77936


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

☎ *After Hours Phone:*
619-662-4100
License Number: A80185
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

🗣 *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *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
Min/Max Age: 0\None
🗣 *Site English Spoken:* Yes
Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *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
Min/Max Age: 0\None

🗣 *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *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
Min/Max Age: 0\None

🗣 *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
🌐 *Website:* www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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

Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

SA 8:00AM-5:00PM
American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**


N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *Website: www.ihpsocal.org*

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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

American Sign Language (ASL): **SAN YSIDRO HEALTH CHULA**
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *Website: www.ihpsocal.org*

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
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

American Sign Language (ASL): **N**


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

🗨 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

🗨 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

🗨 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

EL CAJON

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

📍 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

☎ Phone: 619-662-4100

🕒 After Hours Phone:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

619-662-4100
License Number: A96002
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish, Tagalog
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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: G43179

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM

SA 8:00AM-5:00PM
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No





 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A101888

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

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



Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No





Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدراليًا

SA 8:30AM-5:30PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC
 Website: www.lamaestra.org



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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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC
 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: PA58466
 NPI: 1609849074
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 Website: www.lamaestra.org

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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 Website: www.lamaestra.org

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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 Website: www.lamaestra.org

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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

.B العيادات الصحية المؤهلة فيدراليًا

License Number: 20A14222
NPI: 1609849074
Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
🌐 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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
🌐 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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
🌐 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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
🌐 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدرالياً .B

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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


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

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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


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

Min/Max Age: 0\None


















 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

- N**
 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N
- 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: 619-515-2498
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N
- 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: A163464
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N
- 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: RN428876
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N
- 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: G78814
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: DPM5661
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM


TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM


TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A138815

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None



Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish





Cultural Competency: No



Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM





American Sign Language (ASL):
N



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL): N




 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
 Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-5:00PM
 FR 9:00AM-5:00PM
 SA 9:00AM-5:00PM
 American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

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: A98486

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes N

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDTION

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDTION

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDTION

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: DPM1536

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDTION

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDATION

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDATION

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: Yes

Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDATION

Website: N/A

ENCINITAS

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No



Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A


ESCONDIDO

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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


Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A62467

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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
Min/Max Age: 0\None






Site English Spoken: Yes
Cultural Competency: No


Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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: NP4799
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM



American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM


American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No


 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
 License Number: 550000511

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No






Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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: NP8169
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No




 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
License Number: 80000158

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: 20A14292

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A107557

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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: A109655

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

92025-3002
Phone: 760-520-8100

After Hours Phone:
760-520-8100

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A120771

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None

Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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

Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SA 8:00AM-5:00PM

American Sign Language (ASL): **NEIGHBORHOOD**

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL): **NEIGHBORHOOD**

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org


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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Fax: 360-466-2745


 After Hours Phone:
760-520-8100


License Number: 80000397

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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: A101773

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

☎ *After Hours Phone:*
760-520-8200

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ *Site English Spoken:* Yes

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ *Accessibility:* CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *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

Min/Max Age: 0\None

☑ *Site English Spoken:* Yes

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM N

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ *Accessibility:* CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *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

Min/Max Age: 0\None

☑ *Site English Spoken:* Yes

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM N

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

♿ *Accessibility:* CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *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

Min/Max Age: 0\None

☑ *Site English Spoken:* Yes

Cultural Competency: No

🕒 *Hours:* SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ *Accessibility:* CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

NEIGHBORHOOD HEALTHCARE PEDS 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDS 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PEDS 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

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
Min/Max Age: 0\None

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish



Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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

Min/Max Age: 0\None


 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 Phone: 619-429-3733

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ After Hours Phone:
619-429-3733
License Number: A51447
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ Site English Spoken: Yes
☑ Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None

☑ Site English Spoken: Yes
☑ Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None
☑ Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM

FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: BORREGO
COMMUNITY HEALTH
FOUNDATION
🌐 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
Min/Max Age: 0\None
☑ Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: BORREGO
COMMUNITY HEALTH

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

FOUNDTION


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH

FOUNDTION


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: Yes

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH

FOUNDTION


 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: A113241

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: BORREGO
COMMUNITY HEALTH

FOUNDTION


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDATION


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

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: A75411

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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: A152372

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139



7592 BROADWAY
LEMON GROVE, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




B. العيادات الصحية المؤهلة فيدرالياً


91945-1604
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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

Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N







 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM

FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None



Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM





اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N


 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ *After Hours Phone:*
619-515-2550
License Number: A154298
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL): 🗣️ Website: N/A
N

♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website:* N/A

LEMONGROVE FAMILY HEALTH CENTER

Provider ID: 419139
📍 7592 BROADWAY
LEMONGROVE, CA
91945-1604
☎ *Phone:* 619-515-2550
☎ *After Hours Phone:*
619-515-2550
License Number: A154838
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ *Site English Spoken:* Yes

Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): 🗣️ Website: N/A
N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

LEMONGROVE FAMILY HEALTH CENTER

Provider ID: 419139
📍 7592 BROADWAY
LEMONGROVE, CA
91945-1604
☎ *Phone:* 619-515-2550
☎ *After Hours Phone:*
619-515-2550
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 *Website:* N/A

LEMONGROVE FAMILY HEALTH CENTER

Provider ID: 419139
📍 7592 BROADWAY
LEMONGROVE, CA
91945-1604
☎ *Phone:* 619-515-2550
☎ *After Hours Phone:*
619-515-2550
License Number: A164859
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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


Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM



American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO


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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):  Website: N/A
N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):  Website: N/A
N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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: NP95001050
NPI: 1134155377

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): DIEGO

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 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
Min/Max Age: 0\None

🗣 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

🌐 Website: N/A

NATIONAL CITY

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
Min/Max Age: 0\None

🗣 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 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
Min/Max Age: 0\None

🗣 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 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: A123929
NPI: 1609849074

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدرالياً .B

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.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: A74777

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No

Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsamahan.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No

Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No

Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No

Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Tagalog, Lao, Spanish
Cultural Competency: No
🕒 Hours: SU 8:00AM-6:00PM
MO 8:00AM-6:00PM
TU 8:00AM-6:00PM
WE 8:00AM-6:00PM
TH 8:00AM-6:00PM
FR 8:00AM-6:00PM
SA 8:00AM-6:00PM

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
91950-6208

☎ Phone: 844-200-2426

🕒 After Hours Phone:
844-200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM

SA 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
91950-6208

☎ Phone: 844-200-2426

Fax: 619-434-8999

🕒 After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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
91950-6208

☎ Phone: 844-200-2426

Fax: 619-434-8999

🕒 After Hours Phone:
844-200-2426

License Number: 550002622

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN






🌐 Website: www.operationsamahan.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

 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

License Number: NP95009891


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC

 Website: www.lamaestra.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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: www.lamaestra.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: 619-515-2399

 After Hours Phone:
619-515-2399

License Number: 20A18460


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

 After Hours Phone: 619-515-2399

License Number: A163862

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 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

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856

 Phone: 619-515-2399

 After Hours Phone: 619-515-2399

License Number: A176878

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 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

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856

 Phone: 619-515-2399

 After Hours Phone: 619-515-2399

License Number: NP95010663
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 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

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856

 Phone: 619-515-2399

 After Hours Phone: 619-515-2399

License Number: PA55660
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No

🕒 Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 8:30AM-3:30PM

American Sign Language (ASL): 🗣️ Website: www.fhcsd.org
N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 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

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

🗣️ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 8:30AM-3:30PM

American Sign Language (ASL): DIEGO

N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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
Min/Max Age: 0\None

🗣️ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-3:30PM
MO 8:30AM-3:30PM
TU 8:30AM-3:30PM
WE 8:30AM-3:30PM
TH 8:30AM-3:30PM
FR 8:30AM-3:30PM
SA 8:30AM-3:30PM

American Sign Language (ASL):
N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

🌐 Website: www.fhcsd.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
Min/Max Age: 0\None

🗣️ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿️ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

📍 330 E 8TH ST
NATIONAL CITY, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




B. العيادات الصحية المؤهلة فيدرالياً

91950-2312
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A133539
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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: 619-474-3722

 After Hours Phone:
619-662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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: 619-474-3722

 After Hours Phone:
619-662-4100


License Number: G46444

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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: A118227

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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: A157488

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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: A113624

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): SOUTHERN CALIFORNIA

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF


 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: G71855


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org



SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST NATIONAL CITY, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً




91950-2312
 Phone: 619-662-4100
 Fax: 619-259-2807
 After Hours Phone:
 619-662-4100
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM


American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org

OCEANSIDE

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
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 Website: N/A

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
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM

SA 8:00AM-5:00PM
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None

 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 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: NP95013879

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes





























 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 Website: www.ihpsocal.org Fax: 760-736-8740  After Hours Phone: 760-757-4566 License Number: 80000240 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM
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 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 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 Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM
American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 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
TRUECARE Provider ID: 296476  605 CROUCH ST BLDG C OCEANSIDE, CA 92054-4415  Phone: 760-757-4566	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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: 20A8949

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes N

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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: A149340

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

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B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.vistacommunityclinic.org

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: Yes

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.vistacommunityclinic.org


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


NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.org

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

License Number: 80000240
NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

FR 8:00AM-5:00PM


SA 8:00AM-5:00PM

American Sign Language (ASL): Provider ID: 480315

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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: 20A17371


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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: NP95007885

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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


License Number: 80000745

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: Yes

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

- Hours: SU 8:00AM-5:00PM
- MO 8:00AM-5:00PM
- TU 8:00AM-5:00PM
- WE 8:00AM-5:00PM
- TH 8:00AM-5:00PM
- FR 8:00AM-5:00PM
- SA 8:00AM-5:00PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Cultural Competency: No

- Hours: SU 8:00AM-4:30PM
- MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 8:00AM-4:30PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Cultural Competency: No

- Hours: SU 8:00AM-4:30PM
- MO 8:00AM-4:30PM
- TU 8:00AM-4:30PM
- WE 8:00AM-4:30PM
- TH 8:00AM-4:30PM
- FR 8:00AM-4:30PM
- SA 8:00AM-4:30PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Cultural Competency: No

- Hours: SU 8:00AM-4:30PM
- MO 8:00AM-4:30PM
- TU 8:00AM-4:30PM
- WE 8:00AM-4:30PM
- TH 8:00AM-4:30PM
- FR 8:00AM-4:30PM
- SA 8:00AM-4:30PM

American Sign Language (ASL):

N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org







NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267




16650 HIGHWAY 76

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 8:00AM-4:30PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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
 After Hours Phone:
858-218-3000
License Number: A119661







NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

SAN DIEGO

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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:



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا




619-515-2424
License Number: NP95002226
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 *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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 *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

Min/Max Age: 0\None


 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 *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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 *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

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

 *Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: A140646

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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: A147758

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

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

Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
Fax: 619-238-3807


 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: G71080

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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
Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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
Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No
Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *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

Min/Max Age: 0\None

 *Site English Spoken: yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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

Min/Max Age: 0\None

 *Site English Spoken: yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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

Min/Max Age: 0\None

 *Site English Spoken: yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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: G72486

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None
























 *Site English Spoken: yes*
Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</p> <p>Provider ID: 403583</p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638</p> <p> Phone: 619-233-8500</p> <p> After Hours Phone: 619-233-8500</p> <p>License Number: PA54617</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p> Site English Spoken: yes</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p> Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> Website: www.fhcsd.org</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: N/A</p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p> <p>License Number: 20A12653</p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p> <p>License Number: 20A12732</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p> Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM


SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

📞 *After Hours Phone:*
619-515-2300
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

🗣️ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿️ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *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
Min/Max Age: 0\None
🗣️ *Site English Spoken:* Yes
Cultural Competency: No

🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿️ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *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
Min/Max Age: 0\None

🗣️ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿️ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *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
Min/Max Age: 0\None

🗣️ *Site English Spoken:* Yes
Cultural Competency: No
🕒 *Hours:* SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿️ *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
🌐 *Website:* www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: A142703

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

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TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):


N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: A181809

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: A97036

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: DPM4819


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: G81658

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

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TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: NP11778

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: NP17852
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT




PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

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B. العيادات الصحية المؤهلة فيدراليًا

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: NP95022452

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org


LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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: A68463

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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: A95577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Korean, Spanish, Hindi

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Korean, Spanish, Hindi

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.sdaihc.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: A119010

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM


FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
 858-279-0925
 License Number: G41532
 NPI: 1598122871

Accepting New Patients: Yes
 Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian

Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA


 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

NPI: 1598122871

Accepting New Patients: Yes
 Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:
 Vietnamese, Spanish,
 Chinese, Lithuanian

Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:

Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM
 TU 8:30AM-5:30PM
 WE 8:30AM-5:30PM
 TH 8:30AM-5:30PM
 FR 8:30AM-5:30PM
 SA 8:30AM-5:30PM

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


Medical Group/IPA: IHP OF
 SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

Site English Spoken: Yes
 Site Languages(s) Spoken:

Vietnamese, Spanish,
 Chinese, Lithuanian
 Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
 MO 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM


SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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: 20A7662


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




B. العيادات الصحية المؤهلة فيدراليًا



License Number: A112176
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM


WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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: A175116
NPI: 1598122871




Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: G60630


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM


SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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: A152267


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.sdfamilycare.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM


American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
 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: A94449
NPI: 1598122871


Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: yes
 Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: C174985

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: G41532

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:

Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: G70886

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: NP16433

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

10711 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

Phone: 858-810-8700

After Hours Phone:
858-810-8700

License Number: NP23847

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.sdfamilycare.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: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 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: 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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM
MO 8:00AM-4:30PM
TU 8:00AM-4:30PM
WE 8:00AM-4:30PM
TH 8:00AM-4:30PM
FR 8:00AM-4:30PM
SA 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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 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: 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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:

Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 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 92131-1007

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP95010585

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 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 92131-1007

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: A71544

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 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: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


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
92129-2889

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426


License Number: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 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: 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
Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


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 92131-1007

 Phone: 844-200-2426

Fax: 858-536-8034

 After Hours Phone:
844-200-2426


License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No





 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً





WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
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 92129-2889
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
License Number: DC29074
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM MO 8:30AM-5:30PM TU 8:30AM-5:30PM WE 8:30AM-5:30PM TH 8:30AM-5:30PM FR 8:30AM-5:30PM SA 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 92129-2889
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
License Number: NP22974
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM MO 8:30AM-5:30PM TU 8:30AM-5:30PM WE 8:30AM-5:30PM TH 8:30AM-5:30PM FR 8:30AM-5:30PM SA 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 92129-2889
 Phone: 844-200-2426
 After Hours Phone: 844-200-2426
License Number: NP95003211
NPI: 1801907449
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM MO 8:30AM-5:30PM TU 8:30AM-5:30PM WE 8:30AM-5:30PM TH 8:30AM-5:30PM FR 8:30AM-5:30PM SA 8:30AM-5:30PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN
 Website: www.operationsamahan.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsamahan.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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.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

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 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
92129-2889

Phone: 844-200-2426

Fax: 858-695-9074

After Hours Phone:
844-200-2426

License Number: 550002478

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 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
92129-2889

☎ Phone: 844-200-2426

Fax: 858-695-9074

📞 After Hours Phone:
844-200-2426

License Number: 550003857

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: yes

📄 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

🌐 Website: www.operationsamahan.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

Min/Max Age: 0\None

📄 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN DIEGO

🌐 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: NP7374

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

📍 4094 4TH AVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: NP95001899

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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: NP95005103

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: PT12930

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: PT25155

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None



Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM






American Sign Language (ASL):
N

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B. العيادات الصحية المؤهلة فيدرالياً

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *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
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-9:00PM*
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 *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
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-9:00PM*
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 *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
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-9:00PM*
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO



 *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: PT295173
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No
 *Hours: SU 8:00AM-9:00PM*
MO 8:00AM-9:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: PT40975

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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:


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

619-515-2545
License Number: 550003099
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):  Website: www.fhcsd.org


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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: A180044

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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: A70175

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: DC31024

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N


Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: DC33688

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: A100333

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا

License Number: A119631
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM


TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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: A140324

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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: A154708

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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: A169207

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: A171135

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: A177462

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.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

Min/Max Age: 0\None

Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish

Cultural Competency: No





Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: www.ibclinic.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: A165398
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 *Hours: SU 8:30AM-5:00PM*
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM



American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: www.ibclinic.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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 *Hours: SU 8:30AM-5:00PM*
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
 *Hours: SU 8:30AM-5:00PM*
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 *Website: www.ibclinic.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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.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

Min/Max Age: 0\None

📄 Site English Spoken: Yes

📄 Site Language(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 Website: www.ibclinic.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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


العيادات الصحية المؤهلة فيدرالياً .B

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدرالياً .B

619-662-4100
License Number: DC27523
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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: NPI5657

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SAN DIEGO, CA 92101-5713

☎ Phone: 619-515-2525

📞 After Hours Phone:
619-515-2525

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

License Number: 550002865

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2400

After Hours Phone:
619-515-2400

License Number: 20A17836

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: 20A11612

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM






American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



B. العيادات الصحية المؤهلة فيدراليًا

 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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: 20A12504
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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: 20A14794
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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: 20A15413
NPI: 1134155377




Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM



American Sign Language (ASL):
N

 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: 20A17926

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM
MO 8:00AM-9:00PM
TU 8:00AM-9:00PM
WE 8:00AM-9:00PM
TH 8:00AM-9:00PM
FR 8:00AM-9:00PM
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: NP8563


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SAN DIEGO, CA 92109-7104
Phone: 619-515-2444
After Hours Phone:
619-515-2444
License Number: NP95013978
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

DIEGO

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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



Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No





 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

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





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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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




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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM


FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

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B. العيادات الصحية المؤهلة فيدراليًا

American Sign Language (ASL):  Website: www.fhcsd.org
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدراليًا

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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: 20A19345

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No


Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 8:30AM-5:30PM
SA 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

American Sign Language (ASL):

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
92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: PA58905

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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


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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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


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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM
MO 8:30AM-5:30PM
TU 8:30AM-5:30PM
WE 8:30AM-5:30PM
TH 8:30AM-5:30PM
FR 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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: PA58505


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM


FR 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

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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM


WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 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

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

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

 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: 619-595-0258

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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: A112379

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

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: A80504

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):


N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


PROVIDER
Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN


DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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

Min/Max Age: 0\None

 Site English Spoken: yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None


 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: A119689

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: G61394
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: NP19911

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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: NP95005321


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 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: NP95007000


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

License Number: PA60864


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO


 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: RN810863


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 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

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 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

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-798-3947

After Hours Phone:
619-798-3947

License Number: DC32800

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

<p>PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC  Website: www.lamaestra.org</p>	<p>OPERATION SAMAHAN - MIRA MESA Provider ID: 417101  10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126-2375</p>	<p> Phone: 619-255-9155 Fax: 619-284-4731  After Hours Phone: 619-255-9155 License Number: 20A6433 NPI: 1609849074</p>
<p>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 Min/Max Age: 0\None  Site English Spoken: yes  Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No  Hours: SU 8:00AM-4:30PM MO 8:00AM-4:30PM TU 8:00AM-4:30PM WE 8:00AM-4:30PM TH 8:00AM-4:30PM FR 8:00AM-4:30PM SA 8:00AM-4:30PM American Sign Language (ASL): N</p>	<p> Phone: 844-200-2426  After Hours Phone: 844-200-2426 License Number: C54941 NPI: 1801907449 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: yes  Site Languages(s) Spoken: Spanish, Tagalog Cultural Competency: No  Hours: SU 8:00AM-4:30PM MO 8:00AM-4:30PM TU 8:00AM-4:30PM WE 8:00AM-4:30PM TH 8:00AM-4:30PM FR 8:00AM-4:30PM SA 8:00AM-4:30PM American Sign Language (ASL): N</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC  Website: www.lamaestra.org</p>
<p> Accessibility: CONTACT PROVIDER Medical Group/IPA: OPERATION SAMAHAN  Website: www.operationsamahan.org</p>	<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p>	<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608  Phone: 619-255-9155 Fax: 619-749-5480  After Hours Phone: 619-255-9155 License Number: A81682 NPI: 1609849074 Accepting New Patients: Yes</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-280-7072

After Hours Phone:
619-280-7072

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-564-8765

After Hours Phone:
619-564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

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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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

📞 After Hours Phone:
619-255-9155
License Number: PA13694
NPI: 1609849074
Accepting New Patients: Yes
Min/Max Age: 0\None

🗣️ Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 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: PA21625

NPI: 1609849074

Accepting New Patients: Yes
Min/Max Age: 0\None

🗣️ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 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: A163693

NPI: 1609849074

Accepting New Patients: Yes
Min/Max Age: 0\None

🗣️ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 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
Min/Max Age: 0\None

🗣️ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC

🌐 Website: www.lamaestra.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

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: C55979

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC
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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

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
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

SAN MARCOS

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

NPI: 1598122871

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish

Cultural Competency: No
Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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
Min/Max Age: 0\None

Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish

Cultural Competency: No
Hours: SU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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: G74757

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

📄 Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

📄 Site English Spoken: Yes






























اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

<p> Site Languages(s) Spoken: Spanish</p>	<p>FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p> Website: www.ihpsocal.org</p>
<p>Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>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</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>
<p>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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p>	<p>TRUECARE Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

<p> After Hours Phone: 760-736-6767</p> <p>License Number: NP95002545 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p> <p>TRUECARE Provider ID: 625875</p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> Phone: 760-736-6767</p> <p> After Hours Phone: 760-736-6767</p> <p>License Number: NP95003903 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p>	<p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p> <p>TRUECARE Provider ID: 625875</p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> Phone: 760-736-6767</p> <p> After Hours Phone: 760-736-6767</p> <p>License Number: PA17101 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM</p>	<p>FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p> <p>TRUECARE Provider ID: 625875</p> <p> 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973</p> <p> Phone: 760-736-6767</p> <p> After Hours Phone: 760-736-6767</p> <p>License Number: PA19825 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

American Sign Language (ASL): **TRUECARE**

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): **TRUECARE**

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): **TRUECARE**

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Language(s) Spoken:
Spanish

Cultural Competency: No


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Hours: SU 8:00AM-5:00PM N
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM N
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

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: NM235997

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No







Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.ihpsocal.org




SAN YSIDRO

**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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No
🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **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

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**

Cultural Competency: No

🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **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: PA58672

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**

Cultural Competency: No

🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **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

Min/Max Age: 0\None

📄 **Site English Spoken: Yes**

Cultural Competency: No

🕒 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 **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

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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: 20A7502

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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


Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No
 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *Website: www.ihpsocal.org*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A125329

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A130348

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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


Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No
 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *Website: www.ihpsocal.org*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: G59670

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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


Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No
 **Hours:** SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM
 FR 8:00AM-5:30PM
 SA 8:00AM-5:30PM

American Sign Language (ASL):
 N


 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 **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: NP12112

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese

Cultural Competency: No

 **Hours:** SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
 N


 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 **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: NP95003355

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese

Cultural Competency: No

 **Hours:** SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM
 FR 8:00AM-5:30PM
 SA 8:00AM-5:30PM

American Sign Language (ASL):
 N


 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 **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: PA17162

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese

Cultural Competency: No

 **Hours:** SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM
 FR 8:00AM-5:30PM
 SA 8:00AM-5:30PM

American Sign Language (ASL):
 N

 **Accessibility:** CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 **Website:** www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A71304

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A77936

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Cultural Competency: No
 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
 N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
 N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
 N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 *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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

 *Hours: SU 8:00AM-5:30PM*
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 *Website: www.ihpsocal.org*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

























Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

<p>American Sign Language (ASL): SAN YSIDRO HLTH SAN DIEGO N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>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 Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>
<p>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 Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p>American Sign Language (ASL): SAN YSIDRO HLTH SAN DIEGO N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>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</p>	<p>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 Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM</p>


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None



Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-5:00PM
 SA 8:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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: PA20490
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Language(s) Spoken: Spanish, Tagalog, Portuguese
 Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM
 FR 8:00AM-5:30PM
 SA 8:00AM-5:30PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

.B العيادات الصحية المؤهلة فيدرالياً

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

- Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes

Cultural Competency: No

- Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):
N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

- Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

- Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

- Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N

- Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدراليًا


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM
MO 8:00AM-5:30PM
TU 8:00AM-5:30PM
WE 8:00AM-5:30PM
TH 8:00AM-5:30PM
FR 8:00AM-5:30PM
SA 8:00AM-5:30PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A138938

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: A157505

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No





Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

SA 8:30AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM





American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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: A47906
NPI: 1598122871

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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: G52183

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None







Site English Spoken: Yes
Cultural Competency: No

Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</p> <p>Provider ID: 227469</p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A51843</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p>	<p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL):</p> <p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p>
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</p> <p>Provider ID: 227469</p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: C42207</p>	<p>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</p> <p>Provider ID: 227469</p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: DPM2930</p> <p>NPI: 1598122871</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
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
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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
Min/Max Age: 0\None
Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
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
Min/Max Age: 0\None
Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
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
Min/Max Age: 0\None
Site English Spoken: Yes
Cultural Competency: No
Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA

 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: A49307

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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: A63844

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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
Min/Max Age: 0\None
📄 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None
📄 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None
📄 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM



MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA
🌐 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
Min/Max Age: 0\None
📄 Site English Spoken: Yes
Cultural Competency: No
🕒 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



N

 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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: 619-205-6305
 After Hours Phone:
 619-662-4100
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:30AM-5:00PM
 MO 8:30AM-5:00PM
 TU 8:30AM-5:00PM
 WE 8:30AM-5:00PM
 TH 8:30AM-5:00PM
 FR 8:30AM-5:00PM
 SA 8:30AM-5:00PM
 American Sign Language (ASL):


N

 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM
 FR 8:00AM-5:30PM
 SA 8:00AM-5:30PM
 American Sign Language (ASL):






N

 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Languages(s) Spoken:
 Spanish, Tagalog,
 Portuguese
 Cultural Competency: No
 Hours: SU 8:00AM-5:30PM
 MO 8:00AM-5:30PM
 TU 8:00AM-5:30PM
 WE 8:00AM-5:30PM
 TH 8:00AM-5:30PM
 FR 8:00AM-5:30PM
 SA 8:00AM-5:30PM
 American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.ihpsocal.org

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: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

HEALTH CENTERS OF SAN
DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): www.fhcsd.org

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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: A55932

NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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
Min/Max Age: 0\None



Site English Spoken: Yes
Cultural Competency: No

Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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: A76059
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT





PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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: G78814
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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: NP10943
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

☎ After Hours Phone:
619-515-2555

License Number: NP95013978
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): 🗣️
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

🌐 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: 20A11535
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

☑ Site English Spoken: Yes

Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL): 🗣️
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

🌐 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
Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

🌐 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
Min/Max Age: 0\None

☑ Site English Spoken: Yes
Cultural Competency: No

🕒 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None


 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO


 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

Min/Max Age: 0\None



 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


FR 9:00AM-5:00PM
SA 9:00AM-5:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO
 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
Min/Max Age: 0\None
 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM




American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN DIEGO

 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: A149063
NPI: 1134155377

Accepting New Patients: Yes
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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
Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No
 Hours: SU 9:00AM-5:00PM
MO 9:00AM-5:00PM
TU 9:00AM-5:00PM
WE 9:00AM-5:00PM
TH 9:00AM-5:00PM
FR 9:00AM-5:00PM
SA 9:00AM-5:00PM


American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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: PA54588

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

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

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CENTERS OF SAN
DIEGO

Website: www.fhcsd.org

VISTA

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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

Website: www.vistacommu
nityclinic.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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM


TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

SA 8:00AM-8:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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


Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

-  Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

-  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

Min/Max Age: 0\None

-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N


-  Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


-  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

Min/Max Age: 0\None

-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM


American Sign Language (ASL):

N

-  Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA


-  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

Min/Max Age: 0\None

-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

-  Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

-  Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC


Provider ID: 206338

-  1000 VALE TERRACE DR VISTA, CA 92084-5218

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000


License Number: A173511

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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: A80635

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None




Site English Spoken: Yes




Site Languages(s) Spoken:
Spanish

Cultural Competency: No


 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 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: C52564

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا


TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM


TH 8:00AM-8:00PM

FR 8:00AM-8:00PM


SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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


Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


B. العيادات الصحية المؤهلة فيدرالياً

-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):
N


-  Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

-  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: G86902


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N


-  Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


-  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

Min/Max Age: 0\None

-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM


American Sign Language (ASL):

N

-  Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA


-  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

Min/Max Age: 0\None

-  Site English Spoken: Yes
-  Site Languages(s) Spoken: Spanish

Cultural Competency: No

-  Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

-  Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

-  Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

-  1000 VALE TERRACE DR VISTA, CA 92084-5218

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

☎ Phone: 760-631-5000

🕒 After Hours Phone:
760-631-5000

License Number: NP95009149

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

🌐 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: PA19629

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Spanish

Cultural Competency: No

🕒 Hours: SU 8:00AM-8:00PM

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


 Website: www.vistacommunityclinic.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

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM
MO 8:00AM-8:00PM
TU 8:00AM-8:00PM
WE 8:00AM-8:00PM
TH 8:00AM-8:00PM
FR 8:00AM-8:00PM
SA 8:00AM-8:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: www.vistacommunityclinic.org


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

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 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: 1851300123

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes





























Cultural Competency: No

 Hours: SU 8:30AM-5:00PM
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medical. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

- N**
 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **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
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:30AM-5:00PM**
MO 8:30AM-5:00PM
TU 8:30AM-5:00PM
WE 8:30AM-5:00PM
TH 8:30AM-5:00PM
FR 8:30AM-5:00PM
SA 8:30AM-5:00PM
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **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
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **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
- VISTA COMMUNITY CLINIC GRAPEVINE**
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 **Accessibility: CONTACT PROVIDER**
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 **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
Min/Max Age: 0\None
 **Site English Spoken: Yes**
Cultural Competency: No
 **Hours: SU 8:00AM-5:00PM**
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدرالياً


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 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: RN410247

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No


 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM
MO 8:00AM-5:00PM
TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: Yes

 Hours: SU 8:00AM-5:00PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

B. العيادات الصحية المؤهلة فيدراليًا

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM


SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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\None

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

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\None

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.mtnhealth.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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 8AM-5PM

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

BORREGO SPRINGS

DERMATOLOGY

GREENWAY, HUBERT

Provider ID: 185179

Provider Gender: Male


License Number: C39104


NPI: 1366419004


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Board Certified Specialty: No

 4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

 Phone: (760) 767-5051

 After Hours Phone: (760)
767-5051

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

DERMATOLOGY


ZELAC, DANIEL

Provider ID: 185179

Provider Gender: Male

License Number: G85319

NPI: 1891709903


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN

HOSPITAL

Board Certified Specialty: No

 4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

 Phone: (760) 767-5051

Fax: (760) 767-4552

 After Hours Phone: (760)
767-5051

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GHAFFARI, DAUOD

Provider ID: 185179

Provider Gender: Male

License Number: A98486

NPI: 1053417691

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

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Cultural Competency: N

Board Certified Specialty: No

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

After Hours Phone: (760)
767-5051

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FQHC

BORREGO MEDICAL CLINIC,

Provider ID: 185179

NPI: 1134144165

Provider English Spoken: Y
Cultural Competency: N

4343 YAQUI PASS RD
BORREGO SPRINGS, CA
92004

Phone: (760) 767-5051

Fax: (760) 767-4552

After Hours Phone: (760)
767-5051

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

CAMPO

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL

Provider ID: 519686

Provider Gender: Female

License Number: NP20849

NPI: 1487889846

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LIEBER, CAROL

Provider ID: 631054

Provider Gender: Female

NPI: 1487889846

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

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 8AM-5PM

FAMILY PRACTICE

BAUM, PETER

Provider ID: 549082

Provider Gender: Male

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

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American Sign Language (ASL): NPI: 1710147566

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM

FAMILY PRACTICE


BAUM, PETER

Provider ID: 519686

Provider Gender: Male

License Number: 20A14949

NPI: 1174919971

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE


CORONADO, MYRNA

Provider ID: 519686

Provider Gender: Female

License Number: A112627

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


KAUFHOLD, ANNE

Provider ID: 519686

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

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906

 Phone: (619) 445-6200

 After Hours Phone: (619)
445-6200

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MCINTYRE, RYAN

Provider ID: 519686

Provider Gender: Male

License Number: A133029

NPI: 1164776555

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>FAMILY PRACTICE</p> <p>ORTIZ, KENNETH Provider ID: 519686 Provider Gender: Male License Number: A156607 NPI: 1356761571</p> <p><input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL</p> <p>Board Certified Specialty: No</p> <p><input type="checkbox"/> 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906</p> <p><input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100</p> <p><input type="checkbox"/> Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p>	<p>Board Certified Specialty: No</p> <p><input type="checkbox"/> 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906</p> <p><input type="checkbox"/> Phone: (619) 662-4100 Fax: (619) 824-9071</p> <p><input type="checkbox"/> After Hours Phone: (619) 662-4100</p> <p><input type="checkbox"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\19</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><input type="checkbox"/> Hours: M-F 8AM-5PM</p>	<p>N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <hr/> <p>FAMILY PRACTICE</p> <p>SAIDRO, LUZVIMINDA Provider ID: 519686 Provider Gender: Female License Number: A93746 NPI: 1750364386</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: UC DAVIS MEDICAL CTR</p> <p>Board Certified Specialty: No</p> <p><input type="checkbox"/> 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906</p> <p><input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100</p> <p><input type="checkbox"/> Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><input type="checkbox"/> Hours: M-F 8AM-5PM</p>
<p>FAMILY PRACTICE</p> <p>ROGERS, MATTHEW Provider ID: 530207 Provider Gender: Male NPI: 1639606130</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N</p>	<p>FAMILY PRACTICE</p> <p>ROGERS, MATTHEW Provider ID: 519686 Provider Gender: Male License Number: 20A18400 NPI: 1639606130</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No</p> <p><input type="checkbox"/> 1388 BUCKMAN SPRINGS RD CAMPO, CA 91906</p> <p><input type="checkbox"/> Phone: (619) 662-4100 <input type="checkbox"/> After Hours Phone: (619) 662-4100</p> <p><input type="checkbox"/> Website: www.syhealth.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p> <p>American Sign Language (ASL):</p>	<p>FQHC</p> <p>SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE, Provider ID: 519686</p>

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NPI: 1174164719

☑ Provider English Spoken: Y
Cultural Competency: N

📍 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

☎ Phone: (619) 662-4100
Fax: (619) 478-9164

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

IBANEZ, SIR CEDRIC

Provider ID: 519686

Provider Gender: Male

License Number: A112484

NPI: 1841496452

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: NATIVIDAD
MEDICAL CENTER

Board Certified Specialty: No

📍 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 519686

Provider Gender: Female

License Number: PA20490

NPI: 1619100237

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

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

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 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM




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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-2PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

PEDIATRICS

BURGAMY, ELIZABETH

Provider ID: 326275

Provider Gender: Female

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 8AM-5PM

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

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\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): **O'CONNOR, ERICA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-2PM


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 8AM-5PM

 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 8AM-5PM

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 8AM-5PM

PEDIATRICS



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

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\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

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\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

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\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

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\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

CHULA VISTA

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
 🕒 After Hours Phone: (619) 515-2500
 🌐 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FERNANDEZ LEYVA, JUAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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\None

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

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500

Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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\None

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\None

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


After Hours Phone: (619)
515-2500

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C. دليل الرعاية الأولية

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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\None

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

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

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\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 427322

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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- medic
 al- plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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- medic
 al- plaza

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8AM-2:30PM

FAMILY PRACTICE

ARCE GOMEZ, LAURA

Provider ID: 427322
 Provider Gender: Female
 License Number: A123604

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 9AM-5PM
F 8AM-4PM

FAMILY PRACTICE

ELSAIED, MOHAMMED

Provider ID: 19561


Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 9AM-5PM
F 8AM-4PM

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-medical-plaza


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

JIMENEZ, KRISTAL

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-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

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

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

[/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MERRILL, SARAH

Provider ID: 427322


Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PALOMINO, MARY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

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
 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\None
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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

FAMILY PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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- medic
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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- medic
al- plaza


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 427322

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None
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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM

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

al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None

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\None

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\None

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\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): NPI: 1346480837

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


FQHC


CHULA VISTA FAMILY HLTH CTR,


Provider ID: 206355

 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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-4PM

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1295362242

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4PM

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\None

American Sign Language (ASL): NPI: 1932558301

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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-medical-plaza


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ 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\None

American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-TH 8AM-5PM
 F 8AM-4PM

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- medic al- plaza
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
 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- medic al- plaza
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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

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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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS







Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322


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 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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)

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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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 Phone: (619) 515-2500
 After Hours Phone: (619)
 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MELLENDEZ 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


Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO

Provider ID: 206355

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

 251 LANDIS AVE
 CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
 8:30AM-5:30PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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





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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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206355

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

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- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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)
662-4100
🌐 Website: www.syhealth.org
/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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 8AM-5PM

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



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C. دليل الرعاية الأولية

 *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)*
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 9AM-5PM*

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 8AM-5PM*

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 8AM-5PM*

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*

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL): N

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

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

PEDIATRICS

FLORES, ERNEST

Provider ID: 658652

Provider Gender: Male

NPI: 1043848807

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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 8AM-5PM
SA 8AM-0PM

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 8AM-5PM

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

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-5PM

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 8AM-5PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 482034

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 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 8AM-5PM

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 8AM-5PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

PEDIATRICS

JACOBS-KLEISLI, MILAGROS

Provider ID: 467596

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 8AM-5PM
SA 8AM-0PM

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\None

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 8AM-5PM

PEDIATRICS

MCMAHON, SHARON

Provider ID: 648721

Provider Gender: Female

NPI: 1487279246

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

📍 865 THIRD 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 8AM-5PM
SA 8AM-0PM

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

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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 8AM-5PM

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 8AM-5PM

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 8AM-5PM

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

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 8AM-5PM

PEDIATRICS

PIANSAY, MARIA CORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785



NPI: 1669680351

Provider English Spoken: Y

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 *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\None
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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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 8AM-5PM*


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- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p>	<hr/> <p style="text-align: center;">PEDIATRICS</p> <hr/>	<p>IRVINE MED CTR, DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO</p>
<p style="text-align: center;">PEDIATRICS</p>	<p>YAO, CATHERINE</p>	<p><i>Board Certified Specialty: No</i></p> <p> 769 MEDICAL CENTER CT STE 300 CHULA VISTA, CA 91911</p> <p> <i>Phone: (619) 482-3090</i></p> <p><i>Fax: (619) 482-7350</i></p>
<p>VALENCIA, MARILES</p>	<p><i>Provider ID: 371204</i></p>	<p><i>Board Certified Specialty: No</i></p> <p> 769 MEDICAL CENTER CT STE 300 CHULA VISTA, CA 91911</p> <p> <i>Phone: (619) 482-3090</i></p> <p><i>Fax: (619) 482-7350</i></p>
<p><i>Provider ID: 104059</i></p>	<p><i>Provider Gender: Female</i></p>	<p> <i>After Hours Phone: (619) 482-3090</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\19</i></p> <p><i>American Sign Language (ASL):</i></p>
<p><i>Provider Gender: Female</i></p>	<p> <i>Provider English Spoken: Y</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p>
<p><i>NPI: 1275541625</i></p>	<p><i>Cultural Competency: N</i></p>	<hr/> <p style="text-align: center;">PHYSICIANS ASSISTANT</p> <hr/> <p>BALDONADO, ANALICIA</p> <p><i>Provider ID: 417641</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: PA61683</i></p> <p><i>NPI: 1215477765</i></p>
<p> <i>Provider English Spoken: Y</i></p>	<p><i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i></p>	<p> 352 L ST CHULA VISTA, CA 91911</p> <p> <i>Phone: (619) 515-2325</i></p> <p> <i>After Hours Phone: (619)</i></p>
<p> <i>Provider Language(s) Spoken: Spanish, Tagalog</i></p>	<p><i>Board Certified Specialty: No</i></p>	
<p><i>Cultural Competency: N</i></p>	<p> 769 MEDICAL CENTER CT STE 300 CHULA VISTA, CA 91911</p>	
<p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL</i></p>	<p> <i>Phone: (619) 482-3090</i></p>	
<p><i>Board Certified Specialty: No</i></p>	<p><i>Fax: (619) 482-7350</i></p>	
<p> 1741 EASTLAKE PKWY STE 107 CHULA VISTA, CA 91915</p>	<p> <i>After Hours Phone: (619) 482-3090</i></p>	
<p> <i>Phone: (619) 482-1700</i></p>	<p> <i>Website: N/A</i></p>	
<p><i>Fax: (619) 475-4578</i></p>	<p><i>Medi-Cal Open Panel: Yes</i></p>	
<p> <i>After Hours Phone: (619) 482-1700</i></p>	<p><i>Min/Max Age: 0\19</i></p>	
<p> <i>Website: N/A</i></p>	<p><i>American Sign Language (ASL):</i></p>	
<p><i>Medi-Cal Open Panel: Yes</i></p>	<p>N</p>	
<p><i>Min/Max Age: 0\19</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p>	
<p><i>American Sign Language (ASL):</i></p>	<p> <i>Hours: M-F 8AM-5PM</i></p>	
<p>N</p>	<hr/> <p style="text-align: center;">PEDIATRICS</p> <hr/>	
<p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p>ZARGAR, SHABNAM</p>	
<p> <i>Hours: M-F 8AM-5PM</i></p>	<p><i>Provider ID: 371075</i></p>	
<p>N</p>	<p><i>Provider Gender: Female</i></p>	
<p> <i>Provider English Spoken: Y</i></p>	<p><i>NPI: 1417256074</i></p>	
<p><i>Cultural Competency: N</i></p>	<p> <i>Provider English Spoken: Y</i></p>	
<p><i>Hospital Affiliation: UNIVERSITY OF CALIFORNIA</i></p>	<p><i>Cultural Competency: N</i></p>	

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515-2325
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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-medic-al-plaza

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM


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-medic-al-plaza

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


C. دليل الرعاية الأولية

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1386120723

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-medical-plaza


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: NP95012943

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

EL CAJON

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU-SA 8AM-8PM

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.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

REID, EMILY


Provider ID: 185267

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


C. دليل الرعاية الأولية

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CERTIFIED NURSE PRACTITIONER


WILLIAMS, BREAUNA
 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.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 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
 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Min/Max Age: 0\None

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
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GORDON, CHRISTOPHER


Provider ID: 418340

Provider Gender: Male

License Number: A83390


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 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\None

American Sign Language (ASL):

 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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\None

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)
795-5991

Website: www.lamaestra.org

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: SU-SA 8AM-8PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


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C. دليل الرعاية الأولية

 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8AM-5PM
TH-F 8AM-5PM



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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

AWDISHO, ALAN

Provider ID: 569910

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 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\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
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\None
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\None
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
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4PM

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM
TH-F 8AM-5PM


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-7PM

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\None

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 *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\None
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\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU-SA 8AM-8PM

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERVENTIONAL CARDIOLOGY

MOUSSAVIAN, MEHRAN

Provider ID: 418340
Provider Gender: Male
License Number: 20A7241

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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

 525 E MAIN ST
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
 515-2498
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 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

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☎ Phone: (619) 515-2498

🕒 After Hours Phone: (619) 515-2498

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None


8:30AM-5:30PM

Provider ID: 418340

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

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

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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 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
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
 EL CAJON, CA 92020
 Phone: (619) 873-8940
 After Hours Phone: (619) 873-8940
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-5:30PM

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,

SCRIPPS MERCY HOSPITAL,

SHARP CORONADO HOSP


AND HEALTHCARE CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

American Sign Language (ASL): Provider Gender: Female
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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 569910

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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

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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\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 418501

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

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA

Provider ID: 478971
Provider Gender: Female
License Number: A114674
NPI: 1134205214
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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 8AM-5PM

PEDIATRICS

JACKSON, DANA

Provider ID: 418340
Provider Gender: Female
License Number: 20A14119
NPI: 1689060063
Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese,
Spanish

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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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
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 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




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 8AM-5PM

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 8AM-5PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

312-0347
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

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\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:30AM-5:30PM

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

EL CAJON, CA 92020



Phone: (619) 873-8940



After Hours Phone: (619)
873-8940



Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: SU-SA 8AM-8PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None


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\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


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

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-5PM
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-5PM
 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\None
 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
 After Hours Phone: (760) 753-7842
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WILLIE, KADEN
 Provider ID: 480243

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-5PM
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-5PM
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-5PM
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-5PM
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8AM-5PM
F 8:30AM-5:30PM

PEDIATRICS

BRION, SONJA

Provider ID: 386639
Provider Gender: Female
NPI: 1306817317
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
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 8AM-5PM

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 8AM-5PM

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 8AM-5PM

PEDIATRICS

MURPHY, CARMEL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 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\None
 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
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS, UCSF
 BENIOFF CHILDREN'S
 HOSPITAL OAKLAND
 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 8AM-5PM

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
 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM


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\None
 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\None
 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\None
 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\None
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

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 8AM-5PM

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM SA 8AM-0PM

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\None

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM SA 8AM-0PM

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

460 N ELM ST

ESCONDIDO, CA 92025








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C. دليل الرعاية الأولية

 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8AM-8PM
TH-F 8AM-5PM





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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8AM-8PM
TH-F 8AM-5PM

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\None
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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-0PM


FAMILY PRACTICE

HAMILTON, LISA MARIE


Provider ID: 652372
Provider Gender: Female
License Number: 20A14772


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None







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American Sign Language (ASL): Provider English Spoken: Y
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-0PM

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-0PM

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\None
 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\None
 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\None
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8AM-8PM
TH-F 8AM-5PM

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
SA 8AM-0PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: SU 8AM-0PM
M-F 8AM-8PM
SA 8AM-0PM

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FQHC


NEIGHBORHOOD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

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 8AM-5PM

FQHC

NEIGHBORHOOD


HEALTHCARE PIDS 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 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU 8AM-5PM
W 9AM-5PM
TH-F 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

American Sign Language (ASL):
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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male

License Number: C53062

NPI: 1679102461

Provider English Spoken: Y

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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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-0PM

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

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 8AM-5PM

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)

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520-8100
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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 8AM-5PM

PEDIATRICS

COULLAHAN, JESSICA
 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 8AM-5PM SA 8:30AM-0PM

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\None
 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

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 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
 After Hours Phone: (833)
867-4642

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18



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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: SU 8AM-0PM
M-F 8AM-8PM
SA 8AM-0PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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

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☎ 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 8AM-5PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 8AM-0PM

M-F 8AM-8PM

SA 8AM-0PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ESCONDIDO, CA 92025
 Phone: (760) 747-5400
 Fax: (760) 747-2286
 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 8AM-5PM







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\None
 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\None
 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\None
 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.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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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\None

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\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

CERTIFIED NURSE PRACTITIONER

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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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-4PM
TU 8AM-0:30PM
W-TH 8AM-5PM

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\None

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\None

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 SA 8AM-5PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-4PM
 TU 8AM-0:30PM
 W-TH 8AM-5PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-4PM
 TU 8AM-0:30PM
 W-TH 8AM-5PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-4PM
 TU 8AM-0:30PM
 W-TH 8AM-5PM

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 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 8AM-5PM

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
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 8AM-4PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-7:30PM
SA 8AM-5PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9PM
F 8:30AM-5PM
SA 8:30AM-2PM

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

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Fax: (619) 628-5550

☎ After Hours Phone: (619) 429-3733

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

JULIAN

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 608817

Provider Gender: Female

NPI: 1487889846

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

📍 2721 WASHINGTON ST
JULIAN, CA 92036

☎ Phone: (619) 662-4100

Fax: (760) 765-1278

☎ 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 8AM-5PM

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

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🕒 Hours: M-F 8AM-5PM
SA 8AM-0PM

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 8AM-5PM

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 8AM-5PM

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

🕒 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 8AM-5PM

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

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 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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 8AM-5PM*

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 8AM-5PM*

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 8AM-5PM*

LA MESA

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

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 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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

 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

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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

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: 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-6PM
 W-F 7:30AM-6:30PM
 SA 8:30AM-5PM

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-6PM
 W-F 7:30AM-6:30PM
 SA 8:30AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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) 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 8AM-6PM
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 8AM-6PM
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 8AM-6PM
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 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 8AM-5PM

PEDIATRICS

IMUS, PAUL

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 9AM-5PM

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 8AM-5PM

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 9AM-5PM

PEDIATRICS

RONQUILLO, RINA

Provider ID: 377359

Provider Gender: Female

NPI: 1407047749

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

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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 9AM-5PM

PEDIATRICS

SHORT, RICHARD
Provider ID: 60736
Provider Gender: Male
NPI: 1568552727
Provider English Spoken: Y
Provider Language(s)
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 8AM-6PM
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 8AM-6PM
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 8AM-6PM
SA 11:30AM-3:30PM

LAKESIDE

CHIROPRACTOR


PAGE, BIANCA
Provider ID: 353843
Provider Gender: Female


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

FERRAILO, 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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🕒 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

LEMON GROVE

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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)

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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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FQHC

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CORONADO HOSP AND
HEALTHCARE CTR, 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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MELLENDEZ 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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 9AM-5PM

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

PEDIATRICS

JACKSON, DANA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
 515-2550
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 After Hours Phone: (619)
 515-2550
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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)
 515-2550
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

NATIONAL CITY

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-6PM
F 8AM-5PM

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\None

American Sign Language (ASL): **LIM, IMELDA**

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



 2743 HIGHLAND 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-6PM
 F 8AM-5PM


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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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)
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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.or
 g](http://www.lamaestra.or

 g)
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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


g
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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
 g
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


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.operationsamahan.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TU
 8:30AM-5:30PM


W 10AM-7PM

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/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CANLAS, AVELINO


Provider ID: 417102
 Provider Gender: Male
 License Number: A74854

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C. دليل الرعاية الأولية

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](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-6PM
F 8AM-5PM

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/clinic
s/national- city- family- cli
nic- 1](http://syhealth.org/clinic
s/national- city- family- cli
nic- 1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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/clinic
s/national- city- family- cli
nic- 1](http://syhealth.org/clinic
s/national- city- family- cli
nic- 1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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- cli
nic- 1](http://syhealth.org/clinic
s/national- city- family- cli
nic- 1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

FAMILY PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):

 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418

Provider Gender: Male

License Number: 20A11518

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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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TH 8AM-2PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: TH 8AM-2PM








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.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-6PM
 F 8AM-5PM






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.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM


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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,



Provider ID: 361428
 NPI: 1851757215
 Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.







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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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









Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-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
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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\None
American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ *After Hours Phone: (619) 662-4100*

🌐 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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*

🌐 *Website: www.lamaestra.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-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*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
 N

Accessibility: CONTACT

PROVIDER

Hours: M-F 9AM-5PM

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) 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 9AM-5PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227412

Provider Gender: Male

License Number: C55180

NPI: 1932106986

Provider English Spoken: Y
 Cultural Competency: N

Hospital Affiliation: RADY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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 8AM-5PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 84954

Provider Gender: Male

NPI: 1053414086

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C. دليل الرعاية الأولية

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 8AM-5PM

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/clinic
 s/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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):
 N

Accessibility: CONTACT
 PROVIDER

Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
 N


Accessibility: CONTACT







اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Hours: SU-SA 8AM-5PM

PHYSICIANS ASSISTANT



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
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM






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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM

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.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 9AM-4PM

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.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM

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.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CERTIFIED NURSE 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

CERTIFIED NURSE 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

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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🕒 After Hours Phone: (760)
631-5000

🌐 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

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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

Phone: (760) 631-5000

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL): N

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\None

American Sign Language (ASL): N

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\None

American Sign Language (ASL): N

N

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

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517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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

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SA 9AM-4PM

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4:30PM

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

American Sign Language (ASL):




N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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C. دليل الرعاية الأولية

 Website: www.vistacommunityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM

FQHC

VISTA COMMUNITY CLINIC


HORNE STREET,

Provider ID: 402434

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
 SA 9AM-4PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM
 W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM
 W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-4PM

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\None

American Sign Language (ASL): N

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 *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*

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 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

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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

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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\None

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\None

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

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Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

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 8AM-5PM


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 8AM-5PM SA 8AM-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

 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 8AM-5PM SA 8AM-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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4:30PM


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 8AM-5PM

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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

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OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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 8AM-5PM SA 8AM-0PM

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 8AM-5PM SA 8AM-0PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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)








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631-5000
 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

PEDIATRICS


MILLER, DONALD
 Provider ID: 433589
 Provider Gender: Male
 NPI: 1154356582
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 3605 VISTA WAY BLDG B STE 130
 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 8AM-5PM

PEDIATRICS

PARK, RONALD
 Provider ID: 271889
 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
 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 8AM-5PM
 SA 8AM-4:30PM

PEDIATRICS

PERKINS, RACHEL
 Provider ID: 435952
 Provider Gender: Female
 NPI: 1427398320
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI

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CITY MEDICAL CTR, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

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 8AM-5PM

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\None

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\None

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\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT

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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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

INTERNAL MEDICINE

WINE, DAVID

Provider ID: 612886

Provider Gender: Male

NPI: 1811985542

☐ Provider English Spoken: Y
Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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 8AM-5PM

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 8AM-5PM

PEDIATRICS






MOREIRA, LUCILA



Provider ID: 523761

Provider Gender: Female

NPI: 1104846567


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 *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
 *Accessibility: CONTACT*
PROVIDER
 *Hours: SU-SA 8AM-5PM*

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 8AM-5PM*

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 8AM-5PM*

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-5PM*
SA 9AM-5PM

PEDIATRICS

TAI, KUANGKAI

Provider ID: 351834

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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-5PM
SA 8:30AM-0PM

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-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\None

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-0PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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\None

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\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN DIEGO

CARDIOVASCULAR DISEASE

GARIBYAN, VARTAN

Provider ID: 417937

Provider Gender: Male

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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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5:30PM

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

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\None
American Sign Language (ASL):



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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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-4PM




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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
 SA 8AM-2PM

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):

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C. دليل الرعاية الأولية

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None

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\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 482070
Provider Gender: Female
License Number: NP95010517

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C. دليل الرعاية الأولية

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-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](http://www.sdfamilycare
.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5:30PM

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](http://www.sdfamilycare
.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):








اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 Accessibility: CONTACT PROVIDER




**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 8AM-5PM SA 8AM-2PM

**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\None
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


LENNON, RYAN


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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\None

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\None

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](http://www.operationsa


 mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-TU
 8:30AM-5:30PM

W 10AM-7PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


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SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None



American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER


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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5PM
 TU-TH 8:30AM-8PM
 F 8:30AM-5PM

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.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
 SA 8AM-2PM

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETEL 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

mahan.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-6PM
SA 8AM-2PM

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 8AM-5PM
SA 8AM-2PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM

W-F 8:30AM-5:30PM

SA 9AM-4PM

CERTIFIED NURSE PRACTITIONER

OCAMPO, ELAINE

Provider ID: 482070

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☐ 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\None

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\None

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\None

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-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\None

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 9AM-4PM

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM

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 8AM-5PM
SA 8AM-2PM

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\None
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.or
g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

CERTIFIED NURSE

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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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-5PM

TU 8AM-8PM

W-F 8AM-5PM

SA 9AM-1PM

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-5PM

TU 8AM-8PM

W-F 8AM-5PM

SA 9AM-1PM

CERTIFIED NURSE

PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 482070

Provider Gender: Female

License Number: NP2390


NPI: 1619370475


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-9PM

W-F 8:30AM-5:30PM

SA 9AM-4PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 482070

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 9AM-4PM

CERTIFIED NURSE

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM

TU 8AM-8PM

W-F 8AM-5PM

SA 9AM-1PM

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM

TU 8AM-8PM

W-F 8AM-5PM

SA 9AM-1PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

SEBRING, JAN

Provider ID: 206360

Provider Gender: Female

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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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 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\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 356145

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

Provider English Spoken: Y

Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18
 American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية



<p>N 🇺🇸 Accessibility: CONTACT PROVIDER</p> <hr/> <p>CERTIFIED NURSE PRACTITIONER</p> <hr/> <p>WILLIAMS, BREAUNA 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 9 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇺🇸 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-6PM SA 8AM-2PM</p> <hr/> <p>CERTIFIED NURSE PRACTITIONER</p> <hr/> <p>WOLF, CELIA Provider ID: 417937 Provider Gender: Female</p>	<p>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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇺🇸 Accessibility: CONTACT PROVIDER</p> <hr/> <p>CERTIFIED REGISTERED NURSE MIDWIFE</p> <hr/> <p>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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p>	<p>American Sign Language (ASL): N 🇺🇸 Accessibility: CONTACT PROVIDER</p> <hr/> <p>CERTIFIED REGISTERED NURSE MIDWIFE</p> <hr/> <p>GEPSTEIN, 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N 🇺🇸 Accessibility: CONTACT PROVIDER</p> <hr/> <p>CHIROPRACTOR</p> <hr/> <p>ASSADIAN, MEHRAK Provider ID: 451167 Provider Gender: Female License Number: DC27523 NPI: 1295278281 🇺🇸 Provider English Spoken: Y</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *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\None
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.operationsa-mahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-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\None



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM*

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 418535
Provider Gender: Male

 *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\None




American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TU 8:30AM-5:30PM W 10AM-7PM 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) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
 10737 CAMINO RUIZ STE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-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.or
g](http://www.lamaestra.or
g)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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.syhe
alth.org/locations](https://www.syhe
alth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
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.operationsa

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية


mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

8:30AM-5:30PM

W 10AM-7PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

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

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

CHIROPRACTOR

SOSA, DAVID





Provider ID: 206363

Provider Gender: Male

License Number: DC33150

NPI: 1013308675


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 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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.operationsa
 mahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8AM-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
 Fax: (858) 695-9074
 After Hours Phone: (844)
 200-2426
 Website: www.operationsa
 mahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

 Hours: M-TU
 8:30AM-5:30PM
 W 10AM-7PM
 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
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206360

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM





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\None
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5PM

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TU-TH 8:30AM-8PM
F 8:30AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-W 8:30AM-5PM

TH 8:30AM-9PM

F 8:30AM-5PM

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
8:30AM-5:30PM

TH 9AM-6PM

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\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167
Provider Gender: Female
License Number: A157488

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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\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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C. دليل الرعاية الأولية

American Sign Language (ASL): Board Certified Specialty: No
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\None

American Sign Language (ASL): Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

 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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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
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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU-SA 8AM-9PM

FAMILY PRACTICE

CORMAN, DANIEL



Provider ID: 402851

Provider Gender: Male

License Number: 20A13060

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

-  Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):

N

-  Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4PM

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\None

American Sign Language (ASL):

N

-  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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

American Sign Language (ASL): Provider Gender: Female
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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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\None

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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM

F 8AM-5PM

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\None

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

 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\None

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\None

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\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

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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\None

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 9AM-4PM

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\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

FAMILY PRACTICE

MORALES, ALEJANDRA

Provider ID: 227409

Provider Gender: Female

License Number: A162332

NPI: 1063945657

☐ Provider English Spoken: Y
Cultural Competency: N

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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\None
 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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

Niazi, 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.







C. دليل الرعاية الأولية

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5PM SA 8:30AM-5PM*

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\None
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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*

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 *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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None
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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M 8AM-7PM
 TU-TH 8AM-6PM
 F 8AM-5:30PM
 SA 8AM-5PM*

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\None
American Sign Language (ASL):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
 SA 8AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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C. دليل الرعاية الأولية

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-2PM

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 8AM-5PM
SA 8AM-2PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL): N

☏ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

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\None

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\None

American Sign Language (ASL): N

☏ Accessibility: CONTACT PROVIDER

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 Hours: M-F 8AM-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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

FAMILY PRACTICE

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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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):






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N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WU, JENNIFER

Provider ID: 403583

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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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8:30AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ZINK, IRENE

Provider ID: 227409

Provider Gender: Female

License Number: C54198

NPI: 1215959549

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

FQHC

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC,

Provider ID: 206363

NPI: 1982747671

☐ Provider English Spoken: Y
Cultural Competency: N

📍 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Fax: (619) 795-9849

☎ After Hours Phone: (619) 280-4213

🌐 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:30PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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C. دليل الرعاية الأولية

Fax: (858) 633-4681

☎ After Hours Phone: (619) 563-0250

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

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 8AM-5PM
SA 8AM-2PM

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-5PM
TU-TH 8:30AM-8PM
F 8:30AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-5PM

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

Provider ID: 432308

NPI: 1861933897

☑ Provider English Spoken: Y
Cultural Competency: N

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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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-4:30PM

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
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\None

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 9AM-4PM

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<p style="text-align: center;">FQHC</p> <p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM</p>	<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM</p>	<p>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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>
<p style="text-align: center;">FQHC</p> <p>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</p>	<p style="text-align: center;">FQHC</p> <p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM</p>	<p style="text-align: center;">FQHC</p> <p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5:30PM</p>
	<p style="text-align: center;">FQHC</p> <p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC, Provider ID: 356145 NPI: 1174549232 Provider English Spoken: Y</p>	<p style="text-align: center;">GASTROENTEROLOGY</p>

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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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-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\None

American Sign Language (ASL):
N

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 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

 *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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM*


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM*

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*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

ALASSIL, SALLY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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- healt
 h- center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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)



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




515-2545
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM



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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM



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-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-5PM
 SA 8AM-4PM


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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937
 Provider Gender: Male
 License Number: A154708
 NPI: 1972917672
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-3PM

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, PALOMAR 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Hours: M-F 8AM-5PM


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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-9PM
 F 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-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

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 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\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 482070

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 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\None
 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\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM
SA 8AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-9PM
F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM
F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-4:30PM

INTERNAL MEDICINE

VIDAURAZAGA, 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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\None

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\None

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\None

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

📍 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\None

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C. دليل الرعاية الأولية

American Sign Language (ASL): Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

MULTI SPECIALTY MEDICAL

CLINIC

UCSD MEDICAL GROUP,

Provider ID: 179639

NPI: 1508968751

 Provider English Spoken: Y
Cultural Competency: N

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 25\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

MULTI SPECIALTY MEDICAL CLINIC

UCSD MEDICAL GROUP,


Provider ID: 179619

NPI: 1578672184

 Provider English Spoken: Y
Cultural Competency: N

 330 LEWIS ST STE 400

SAN DIEGO, CA 92103

 Phone: (619) 471-9260

Fax: (619) 471-9310

 After Hours Phone: (619)
471-9260

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\25

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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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5PM

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

Medi-Cal Open Panel: Yes

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8:30AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:30PM

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\None

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

🕒 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:30AM-5:30PM
TU 8:30AM-9PM
W-F 8:30AM-5:30PM
SA 9AM-4PM

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-7PM

TU-TH 8AM-6PM

F 8AM-5:30PM

SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 416831

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

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
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)

515-2444
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:30AM-5PM TH 9:30AM-6PM

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

🕒 Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5PM

Provider ID: 206363

Provider Gender: Female

License Number: A118095

NPI: 1073701041

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

📞 Phone: (619) 515-2444

🕒 After Hours Phone: (619)
515-2444

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8:30AM-5PM

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH 8AM-5:30PM
F 8AM-5PM

☑ 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

🕒 After Hours Phone: (619)
515-2560

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

Provider ID: 402851

Provider Gender: Female

License Number: A118095

NPI: 1073701041

☑ Provider English Spoken: Y

☑ Provider Language(s)

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

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA

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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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

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
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\18
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-5PM

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
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

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

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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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
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

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 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

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
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\18

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206360

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 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
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY


Provider ID: 206363

Provider Gender: Female

License Number: A178499

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


**FOLCH TORRES-AGUIAR,
BEATRIZ**


Provider ID: 206363

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

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:30AM-5:30PM

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

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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

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

 Phone: (619) 515-2424

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCH TORRES-AGUIAR, BEATRIZ

Provider ID: 206360

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

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-7PM

TU-TH 8AM-6PM

F 8AM-5:30PM

SA 8AM-5PM

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
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\None

American Sign Language (ASL):

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 416831

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

📍 3514 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\18

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-5PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206363

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

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 402851

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

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W 8:30AM-5PM
TH 9:30AM-6PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 206360

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

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

OBSTETRICS / GYNECOLOGY


LIPSCHITZ, LISA

Provider ID: 416831

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

 3514 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\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206362

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

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

515-2424
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
 8:30AM-5:30PM
 F 8:30AM-5PM

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206360
 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

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM
 TU-TH 8AM-6PM
 F 8AM-5:30PM
 SA 8AM-5PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206363
 Provider Gender: Female
 License Number: A116680
 NPI: 1700073962

Provider English Spoken: Y
 Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM

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
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619)
515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

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
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-7PM

TU-TH 8AM-6PM

F 8AM-5:30PM

SA 8AM-5PM

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

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

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: 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

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\None

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.operationsa

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

mahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER


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
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM

TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

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
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\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

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,
GROSSMONT HOSPITAL

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (616) 515-2444
After Hours Phone: (616)
515-2444
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5PM

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
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Hours: M-TH 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206363
Provider Gender: Female
License Number: A164859

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
Accessibility: CONTACT

PROVIDER

Hours: M-TH 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: www.syhealth.org/clinics/king-chavez-health-center
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

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\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
 8:30AM-5:30PM
 F 8:30AM-5PM




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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8:30AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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

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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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18
 American Sign Language (ASL):
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على
 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *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*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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

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 1809 NATIONAL AVE
 SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
 515-2300
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8:30AM-6PM
 TH 8:30AM-6PM
 F 8:30AM-5PM
 SA 8:30AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 American Sign Language (ASL):
 N


 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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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 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM SA 8AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-9PM

W-F 8:30AM-5:30PM

SA 9AM-4PM


PEDIATRICS


ANDREE, GREGOR

Provider ID: 233532

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): Provider Gender: Male

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


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): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-5PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male

License Number: C55180

NPI: 1932106986

Provider English Spoken: Y

Cultural Competency: N

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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\None

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): NPI: 1780719872

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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 8AM-8:30PM
F 8AM-5PM

SA 8AM-2PM

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268

Provider Gender: Female

License Number: A111170

NPI: 1417279324

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☐ 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

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

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

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

American Sign Language (ASL):
 N

♿ Accessibility: CONTACT
 PROVIDER

🕒 Hours: M-F 8AM-6PM
 SA 8AM-2PM

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360
 Provider Gender: Male
 License Number: 20A15743
 NPI: 1174942544

☐ Provider English Spoken: Y
 ☐ Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M 8AM-7PM
TU-TH 8AM-6PM
F 8AM-5:30PM
SA 8AM-5PM

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\None

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 9AM-4PM

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

Hours: M-F 8AM-5PM

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

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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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

PEDIATRICS

FRIEDMAN, JAIME

Provider ID: 230500

Provider Gender: Female

NPI: 1144297961

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

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 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7PM

TU-TH 8:30AM-6PM

F 8:30AM-5:30PM

SA 8:30AM-5PM

PEDIATRICS

GUPTA, VARSHA

Provider ID: 206360

Provider Gender: Female

License Number: A164889

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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 8AM-5PM

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):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8:30PM
F 8AM-5PM
SA 8AM-2PM

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 8AM-5PM

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 8AM-5PM

PEDIATRICS

JUAREZ, PATRICIA

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 8AM-5PM

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\None
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER
Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
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-6PM
F 8:30AM-0PM

PEDIATRICS

LAWRIE, ALISA

Provider ID: 660912
Provider Gender: Female
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 8AM-8PM
F 8AM-5PM

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







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SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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 8AM-5PM

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 319049

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

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

PEDIATRICS

MARTINEZ ANDREE, INGRID

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 8AM-5PM

PEDIATRICS

MLNARIK, ANASTASIA

Provider ID: 558645

Provider Gender: Female


NPI: 1972000537

 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 8AM-5PM
SA 8AM-0PM

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M 8:30AM-7PM

TU-TH 8:30AM-6PM

F 8:30AM-5:30PM

SA 8:30AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

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 8AM-5PM

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

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C. دليل الرعاية الأولية

☎ After Hours Phone: (619) 233-8500

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5:30PM

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-4PM

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 8AM-5PM
SA 8AM-0PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

PEDIATRICS

RUBENSTEIN, STUART

Provider ID: 521305

Provider Gender: Male

NPI: 1689633844

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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

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3514 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\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
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

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 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SHIAU, NANCY

Provider ID: 40852

Provider Gender: Female

NPI: 1750352779

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 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785





NPI: 1851323315




Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.







 *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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5:30PM*

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 8AM-5PM*

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 8AM-5PM SA 8AM-0PM*

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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 8AM-5PM*

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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 8AM-5PM
SA 8AM-0PM

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 8AM-5PM

PEDIATRICS

WEATHERLY, JACOB

Provider ID: 637376

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C. دليل الرعاية الأولية

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
 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 8AM-5PM
 SA 8:30AM-0PM

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 N

.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-9PM
 W-F 8:30AM-5:30PM
 SA 9AM-4PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *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\None

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*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-6PM*

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SA 8AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU-W 8:30AM-5PM

TH 8:30AM-9PM

F 8:30AM-5PM

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

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Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:30PM

PHYSICIANS ASSISTANT

DRAME, 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\None

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:30AM-5:30PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-2PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
TU 8AM-8PM
W-F 8AM-5PM
SA 9AM-1PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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.syhealth.org/locations>

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619)
515-2525

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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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.operationsamahahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM






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\None
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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-2PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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

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C. دليل الرعاية الأولية

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA



Provider ID: 482070

Provider Gender: Female



License Number: G41532

NPI: 1467434811

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



 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\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-9PM
 W-F 8:30AM-5:30PM
 SA 9AM-4PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 9AM-4PM

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



.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 9AM-4PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-9PM
 W-F 8:30AM-5:30PM
 SA 9AM-4PM

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1407391808

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1578706743

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

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
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

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

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DAHMS, MADELYNN


Provider ID: 206360


Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

**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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-9PM
F 8AM-5PM

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363

Provider Gender: Female

License Number: A142743

NPI: 1649564295

Provider English Spoken: Y
 Provider Language(s)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5:30PM

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

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN MARCOS

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA



Provider ID: 206426


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 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\None

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 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\None

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 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\None

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 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\None

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 RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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 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\None
 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\None
 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\None
 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\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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\None

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\None

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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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 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\None

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 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\None

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 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\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): Board Certified Specialty: No
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 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\None

American Sign Language (ASL): Board Certified Specialty: No
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

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American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

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License Number: NP21368


NPI: 1952658445

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
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 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\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

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

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Board Certified Specialty: No

150 VALPRED RD
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736-6767

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-5PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

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NPI: 1407287469

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MEDICAL CENTER

Board Certified Specialty: No

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Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-5PM

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

150 VALPRED 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\None

American Sign Language (ASL):

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Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426

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License Number: NM235997

NPI: 1801134275

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

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PROVIDER

CERTIFIED REGISTERED

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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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C. دليل الرعاية الأولية

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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\None
American Sign Language (ASL):
N
 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

 150 VALPRED A RD
SAN MARCOS, CA 92069
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736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 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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PROVIDER

FAMILY PRACTICE

MATIAS, JULIE



Provider ID: 206426
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Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No







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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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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 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-5PM

FAMILY PRACTICE

NATH, DEVARSHI

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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\None
 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
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After Hours Phone: (760)
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 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-5PM

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

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 Accessibility: CONTACT
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FAMILY PRACTICE

NATH, DEVARSHI

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 Provider Gender: Male
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 Cultural Competency: N
 Board Certified Specialty: No

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 736-6767

Website: www.ihpsocal.org
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 American Sign Language (ASL):
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 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
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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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C. دليل الرعاية الأولية

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\None
American Sign Language (ASL):
N
♿ 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
☎ Phone: (760) 736-6767
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ 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
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
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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)
Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WILLIE, KADEN
Provider ID: 206426





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C. دليل الرعاية الأولية

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 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\None
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 VALPREDA 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FQHC

TRUECARE,
Provider ID: 206426
NPI: 1811617939
 Provider English Spoken: Y
Cultural Competency: N
 150 VALPREDA 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-5PM

FQHC

TRUECARE,
Provider ID: 206426
NPI: 1598484255
 Provider English Spoken: Y
Cultural Competency: N
 150 VALPREDA 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-5PM

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)
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
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FQHC


TRUECARE,
Provider ID: 614511

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NPI: 1811617939

 Provider English Spoken: Y
Cultural Competency: N

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SAN MARCOS, CA 92078

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Fax: (760) 736-6744


 After Hours Phone: (760)
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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

FQHC


TRUECARE,

Provider ID: 206426

NPI: 1245246917


 Provider English Spoken: Y
Cultural Competency: N

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 After Hours Phone: (760)
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Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

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
ENCINITAS

Board Certified Specialty: No

Board Certified Specialty: No

 150 VALPREDA RD
SAN MARCOS, CA 92069

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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
ENCINITAS

Board Certified Specialty: No

Board Certified Specialty: No

 150 VALPREDA RD
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
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 Accessibility: CONTACT PROVIDER

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

ENCINITAS

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\None

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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

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 Provider Language(s) Spoken: Spanish


Cultural Competency: N

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Min/Max Age: 0\None

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INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

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 Provider Language(s) Spoken: Spanish


Cultural Competency: N

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-5PM

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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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-5PM

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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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-5PM

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female


License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


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C. دليل الرعاية الأولية

 *Provider Language(s)
Spoken: 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\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

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

 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\None

*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\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM
SA 8AM-5PM*

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
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 *Phone: (760) 736-6767*


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736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM
SA 8AM-5PM*

OBSTETRICS / GYNECOLOGY

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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
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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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

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\None

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

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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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

 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 8AM-5PM

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 8AM-5PM

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 8AM-6PM

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426





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C. دليل الرعاية الأولية

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 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\None
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 RD
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736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

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 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
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-6PM

SA 8AM-5PM


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 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\None
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

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 *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
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736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No

 150 VALPRED A RD

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736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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 8AM-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\None

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

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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\None

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\None

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\None

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

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Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

License Number: PA22667

NPI: 1174964001

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

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\None

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 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\None

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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

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License Number: PA17101

NPI: 1316947302

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Board Certified Specialty: No

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🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None






American Sign Language (ASL):



N








♿ Accessibility: CONTACT
PROVIDER

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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 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\None
 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 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-5PM

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 RD
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 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-5PM

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 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-5PM


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 VALPRED RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes

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C. دليل الرعاية الأولية

Min/Max Age: 0\None

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 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\None

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

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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\None

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 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

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

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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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426





Provider Gender: Female

License Number: PA51867

NPI: 1295147387



Provider English Spoken: Y




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 *Provider Language(s)*
Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
 150 VALPRED 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\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM SA 8AM-5PM*

SAN YSIDRO







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\None
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\None
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\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

CERTIFIED NURSE PRACTITIONER


GARCIA, TEDAYSHIA
Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
 *Provider English Spoken: Y*
 *Provider Language(s)*

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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\None

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\None
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\None

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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\None

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



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 Website: <https://www.syhealth.org/locations>
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 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\None

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\None

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\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

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ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227411

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

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None

American Sign Language (ASL): License Number: A138474

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

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/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

📍 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 227411

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

🕒 After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal للمعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

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\None
 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\None
 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\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>PROVIDER</p> <hr/> <p><u>FAMILY PRACTICE</u></p> <p>HERNANDEZ, RALPH Provider ID: 206292 Provider Gender: Male License Number: C42207 NPI: 1285782151</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No</p> <p> 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</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>	<p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No</p> <p> 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</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>	<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM</p>
<p><u>FAMILY PRACTICE</u></p> <p>KAUFHOLD, ANNE Provider ID: 206292 Provider Gender: Female License Number: A88893 NPI: 1164508073</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Arabic, Spanish Cultural Competency: N</p>	<p><u>FAMILY PRACTICE</u></p> <p>LARA, LESLEY Provider ID: 206292 Provider Gender: Female License Number: A173435 NPI: 1184112682</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No</p> <p> 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</p>	<p><u>FAMILY PRACTICE</u></p> <p>LEE, JOSEPH Provider ID: 227469 Provider Gender: Male License Number: A164201 NPI: 1417480948</p> <p> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: ST ELIZABETH HOSP Board Certified Specialty: No</p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 Website: https://www.syhealth.org/locations</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM</p>
	<p><u>FAMILY PRACTICE</u></p> <p>ELIZABETH HOSP Board Certified Specialty: No</p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173 Phone: (619) 662-4100 After Hours Phone: (619) 662-4100 Website: https://www.syhealth.org/locations</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM</p>	

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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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

- center
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206292

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
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\None

American Sign Language (ASL): License Number: 20A12653

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

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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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

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\None
 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\None
 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: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 206292
 Provider Gender: Female
 License Number: A145480
 NPI: 1508286709

Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

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.syhe
 alth.org/locations
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

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

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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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM


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\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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

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C. دليل الرعاية الأولية

 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\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292

Provider Gender: Male

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C. دليل الرعاية الأولية

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\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

FQHC

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER,

Provider ID: 206292

NPI: 1952364747

Provider English Spoken: Y








Cultural Competency: N

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 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8AM-5PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

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\None
 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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\None

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

INTERNAL MEDICINE

CHEN, TSUH YIN

Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None
 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\None
 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](http://www.syhealth.org/clinics/san-ysidro-health-center)
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DILLON, BENEDICT

Provider ID: 227411
 Provider Gender: Male
 License Number: A11118
 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](http://www.syhealth.org/clinics/maternal-child-health-center)
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM
 SA 8AM-2PM



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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM



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\None

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\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 206292


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C. دليل الرعاية الأولية

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\None
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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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\None
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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 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\None
 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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

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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\None

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/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS GREEN





HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MERCY HOSPITAL

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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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8:30AM-5PM

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\None

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\None

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5:30PM
 SA 8:30AM-2PM

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY
Provider ID: 227411
Provider Gender: Female


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


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\None

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\None

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8:30AM-5PM

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA

Provider ID: 227411

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y
Cultural Competency: N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5PM

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\None

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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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\None

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/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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

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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/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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/clinic/s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

NISSAN, BETI

Provider ID: 206292

Provider Gender: Female

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C. دليل الرعاية الأولية

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

- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5:30PM

SA 8:30AM-2PM

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

- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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C. دليل الرعاية الأولية

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-7:30PM
SA 8:30AM-2PM

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\None

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

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\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5PM

PEDIATRICS

TAYLOR, TASHA

Provider ID: 227411

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C. دليل الرعاية الأولية

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](http://www.syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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\None

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\None

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.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 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\None
 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\None
 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\None
 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\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

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\None

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\None

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

CLARK, SKYLAR

Provider ID: 227469

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

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\None
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\None
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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5:30PM
SA 8:30AM-2PM

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

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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 8AM-5PM

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 8AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Phone: (619) 515-2555

After Hours Phone: (619) 515-2555

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Phone: (619) 515-2555

After Hours Phone: (619)



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515-2555
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7PM
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7PM
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206361
 Provider Gender: Female

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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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM TU 8:30AM-7PM 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM TU 8:30AM-7PM 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None

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American Sign Language (ASL): Provider ID: 206361

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
W-F 8:30AM-5:30PM

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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)
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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

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
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL): Provider Gender: Female
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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361

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)
515-2555

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM

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


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM

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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-7PM
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Hospital Affiliation: SCRIPPS
 MERCY HOSPITAL, SHARP
 CORONADO HOSP AND

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7PM
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






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 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\None
 American Sign Language (ASL):
 N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

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*
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): N

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F 8:30AM-5PM*

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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F 8AM-5PM*

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*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

 *Hours: M 8AM-5PM
 TU 10:30AM-7:30PM
 W-F 8AM-5PM*

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*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

C. دليل الرعاية الأولية

PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM

FQHC

VCC DURIAN,

Provider ID: 411518
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
105 DURIAN ST STE A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM
 TU 10:30AM-7:30PM

W-F 8AM-5PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 9AM-4PM
 W 9AM-0PM
 TH-F 9AM-4PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


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): Provider ID: 100779

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-6PM SA 9AM-1PM


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

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-6PM SA 9AM-1PM

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 8AM-5PM

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)









اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

631-5000
 Website: www.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 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-6PM SA 9AM-1PM

PEDIATRICS



KRAK, MICHAEL
 Provider ID: 23455
 Provider Gender: Male
 NPI: 1003989419
 Provider English Spoken: Y
 Provider Language(s) 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-6PM SA 9AM-1PM

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.vistacommu-nityclinic.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM

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



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 8AM-5PM
 SA 8AM-0PM

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 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 10AM-2PM
 M-F 8AM-5PM
 SA 8AM-0PM

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9AM-2PM
 F 8AM-5PM
 SA 8AM-4PM

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

BRAWLEY

PEDIATRIC CARDIOLOGY

SILVA SEPULVEDA, JOSE

Provider ID: 256218

Board Certified Specialty: No

207 W LEGION RD
BRAWLEY, CA 92227

Phone: (760) 351-3291

After Hours Phone: (760)
351-3291

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 256195

Board Certified Specialty: No

207 W LEGION RD
BRAWLEY, CA 92227

Phone: (760) 351-7643

After Hours Phone: (760)
351-7643

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

CAMPO

FAMILY PRACTICE

BAUM, PETER

Provider ID: 296383

Board Certified Specialty: No

1388 BUCKMAN SPRINGS
RD

CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE


ROGERS, MATTHEW

Provider ID: 294843

Board Certified Specialty: No

 1388 BUCKMAN SPRINGS RD

CAMPO, CA 91906


 Phone: (619) 662-4100


Fax: (619) 824-9071

 After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1639606130

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

NEUROLOGY

YOSHII-CONTRERAS, JUNE

Provider ID: 296589

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D. دليل مقدمي الخدمات المتخصصين

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

MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,

TRI CITY MEDICAL CTR,

SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M 7AM-7PM

TU 7AM-5PM

W 7AM-7PM

TH 7AM-5PM

F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M 7AM-7PM
TU 7AM-5PM
W 7AM-7PM
TH 7AM-5PM
F 7AM-7PM*
 *Website: N/A*
IPA: Community Care IPA LLC

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\None
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 7AM-6PM*
 *Website: N/A*
IPA: Community Care IPA LLC




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*
 *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\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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\None
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group



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\None
*American Sign Language (ASL):
N*





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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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)







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D. دليل مقدمي الخدمات المتخصصين

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

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)
421-3361
Provider Gender: Female
NPI: 1508370875
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Imperial Health Holdings

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1023178233

 Provider English Spoken: Y

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Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD


CERTIFIED NURSE PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 300304

Board Certified Specialty: No

 880 THIRD 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: 1821331174

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10AM-4PM
M-F 8:30AM-7:30PM

SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
Imperial Health Holdings

Medical Group-SD


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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:30AM-5:30PM

SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:30AM-5:30PM

SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

FRENCH, TONIANNE

Provider ID: 290538

Board Certified Specialty: No

📍 333 H ST STE 2080

CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:30AM-5:30PM

SA 8:30AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

EMERGENCY MEDICINE

REARDON, JACQUELINE

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:30AM-5:30PM

SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N


























Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A


IPA: IHP of Southern Cal-PHP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






<p>FAMILY PRACTICE</p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM  Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP</p>
<p>FAMILY PRACTICE</p> <p>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</p>	<p>GASTROENTEROLOGY</p> <p>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</p>	<p>GASTROENTEROLOGY</p> <p>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</p>

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D. دليل مقدمي الخدمات المتخصصين









VALLEY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None








American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:30AM-4:30PM
 F 8:30AM-3PM
 Website: N/A
 IPA: BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

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)
 426-0841
 Provider Gender: Female
 NPI: 1902853344


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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD

HEMATOLOGY / ONCOLOGY

MOOLANI, RAMESH

Provider ID: 295976

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

VISTA, LOMA LINDA

UNIVERSITY MED CTR

MURRIETA, SHARP CHULA

VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

INTERNAL MEDICINE

NAIDZIONAK, ULADZISLAW

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 9AM-4PM

TU 9AM-5PM

W 9AM-4PM

TH-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

<p> <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 9AM-5PM <input type="checkbox"/> Website: N/A IPA: Community Care IPA LLC </p>	<p> 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\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM <input type="checkbox"/> Website: N/A IPA: Community Care IPA LLC </p>	<p> Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM <input type="checkbox"/> Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD </p>
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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
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Arabic, Bulgarian,
 Russian, Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS

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




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,






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D. دليل مقدمي الخدمات المتخصصين




SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 295846
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: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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,
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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network, UCSD Medical Group

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 264687

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A


IPA: Rady Childrens Health
Network


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
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

NEPHROLOGY

MOOLANI, UJJALA

Provider ID: 296069

Board Certified Specialty: No

 752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None






















American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين






<p>N  Accessibility: CONTACT PROVIDER  Hours: M-F 9AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD</p>	<p>Imperial Health Holdings Medical Group-SD</p>
NEPHROLOGY		
<p>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 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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\None American Sign Language (ASL): N</p>	<p>VIDEEN, JOHN 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 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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\None American Sign Language (ASL): N</p>	<p>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 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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\None American Sign Language (ASL): N</p>
<p>N  Accessibility: CONTACT PROVIDER  Hours: M-F 9AM-5PM  Website: N/A</p>	<p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP,</p>	<p>Imperial Health Holdings Medical Group-SD</p>




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<p>NEPHROLOGY</p> <p>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\None American Sign Language (ASL):</p>	<p>N  Accessibility: CONTACT PROVIDER  Hours: M-F 9AM-5PM  Website: N/A IPA: Community Care IPA LLC</p>	<p>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</p>
	<p>NEUROLOGY</p> <p>HOSSEIN ZADEH MALEKI, ANA Provider ID: 304999 Board Certified Specialty: No  450 FOURTH AVE STE 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\None American Sign Language (ASL):</p>	<p> 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\None American Sign Language (ASL):</p>
	<p>N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>NEUROLOGY</p> <p>SORIA LOPEZ, JOSE Provider ID: 295744 Board Certified Specialty: No</p>
	<p>NEUROLOGY</p> <p>MOHAMMAD, AHMAD SHAH</p>	

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



D. دليل مقدمي الخدمات المتخصصين







 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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-6PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH 8AM-5PM
F 8AM-0PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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
Min/Max Age: 13\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH 8AM-5PM
F 8AM-0PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7AM-6PM
 SA 7AM-2PM
 Website: N/A
 IPA: Community Care IPA LLC

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM
 TU 7AM-5PM

W 8AM-5PM
 TH-F 7AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N

N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM
 TU 7AM-5PM
 W 8AM-5PM
 TH-F 7AM-5PM

Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

OPTOMETRIST

CHAIN, PEI CHI
 Provider ID: 297621
 Board Certified Specialty: No
 342 F ST
 CHULA VISTA, CA 91910
 Phone: (619) 422-1471

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262229

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 9AM-6PM
 Website: N/A
 IPA: Community Care IPA LLC,
 Imperial Health Holdings
 Medical Group-SD


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\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 9AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,
 Imperial Health Holdings
 Medical Group-SD


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 9AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,
 Imperial Health Holdings


Medical Group-SD

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings


Medical Group-SD

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\None

American Sign Language (ASL):



N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD








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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OTOLARYNGOLOGY

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY


MEDICINE


DEVERA, GEMMIE

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

MEDICINE


GROSS, MATTHEW

Provider ID: 297176

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: 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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

MEDICINE

MENDES, CHANTAL

Provider ID: 295669

Board Certified Specialty: No

 386 E H ST STE 202

CHULA VISTA, CA 91910

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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

📞 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **RICHARDSON, HENRY**

N
Accessibility: CONTACT PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

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

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\None
American Sign Language (ASL):

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):

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\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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

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)

PHYSICAL MEDICINE / REHABILITATION

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D. دليل مقدمي الخدمات المتخصصين


MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295945

Board Certified Specialty: No

 2452 FENTON ST STE C101
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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

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D. دليل مقدمي الخدمات المتخصصين


 *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\None
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 9AM-4:30PM*
 *Website: N/A*
IPA: Community Care IPA LLC




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
PROVIDER*
 *Hours: M-F 9AM-5PM*
 *Website: N/A*
*IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network*

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\None
*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 8AM-8PM
SA 8AM-4PM*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP



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\None


*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F 8AM-8PM
SA 8AM-4PM*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): IPA: Community Care IPA LLC
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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 8AM-5PM

 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 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-5PM

SA 8AM-1PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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


























Medi-Cal Open Panel: Yes

Min/Max Age: 0\None




American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين





<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p> <hr/> <p><u>REGISTERED PHYSICAL THERAPIST</u></p> <hr/> <p>KARANDE, PRACHI</p> <p>Provider ID: 287100</p> <p>Board Certified Specialty: No</p> <p> 1392 E PALOMAR ST STE 503 CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p> <p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p> <p>Provider Gender: Female</p> <p>NPI: 1699357525</p> <p> Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 16\None</p> <p>American Sign Language (ASL): N</p>	<p>NGUYEN, TIA</p> <p>Provider ID: 305014</p> <p>Board Certified Specialty: No</p> <p> 1392 E PALOMAR ST STE 503 CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p> <p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p> <p>Provider Gender: Female</p> <p>NPI: 1457136269</p> <p> Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-TH 7AM-7PM F 7AM-4PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p> <hr/> <p><u>REGISTERED PHYSICAL THERAPIST</u></p> <hr/> <p>NGUYEN, TIA</p> <p>Provider ID: 305013</p> <p>Board Certified Specialty: No</p> <p> 1392 E PALOMAR ST STE 503 CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p> <p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p>	<p>482-3000</p> <p>Provider Gender: Female</p> <p>NPI: 1457136269</p> <p> Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-TH 7AM-7PM F 7AM-4PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p> <hr/> <p><u>REGISTERED PHYSICAL THERAPIST</u></p> <hr/> <p>NOVENCIDO, ANDREW</p> <p>Provider ID: 301994</p> <p>Board Certified Specialty: No</p> <p> 1392 E PALOMAR ST STE 503 CHULA VISTA, CA 91913</p> <p> Phone: (619) 482-3000</p> <p>Fax: (619) 482-3001</p> <p> After Hours Phone: (619) 482-3000</p> <p>Provider Gender: Male</p> <p>NPI: 1447723937</p> <p> Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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
 *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\None
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M 7AM-7PM*
TU 7AM-0PM
W-TH 7AM-7PM
F 7AM-0PM
 *Website: N/A*
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M 7AM-7PM*
TU 7AM-0PM
W-TH 7AM-7PM
F 7AM-0PM
 *Website: N/A*
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP




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*




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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP



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\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,


IHP of Southern Cal-PHP








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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 7AM-7PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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
 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-4:30PM
 Website: N/A
IPA: Imperial Health Holdings Medical Group-SD

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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
☐ Provider Language(s)
Spoken: Armenian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Armenian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 7AM-7PM
M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 7AM-7PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

MORAL, JOHN

Provider ID: 297841
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH 8AM-5PM
F 8AM-4PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

<p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-TH 8AM-5PM F 8AM-4PM</p> <p> Website: N/A</p> <p>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>	<p>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</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>	<p>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</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>
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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

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

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: Community Care IPA LLC,
UCSD Medical Group



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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT


PROVIDER


 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

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

Provider Gender: Female
NPI: 1902853344

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

UROLOGY

SALMASI, AMIRALI

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D. دليل مقدمي الخدمات المتخصصين

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
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: Community Care IPA LLC,
UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: TU-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

BRANNEN, MANDY

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 4PM-7PM
W 4PM-7PM
F 4PM-7PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

CHUDACEK, JANET

Provider ID: 241626

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 4PM-7PM
W 4PM-7PM
F 4PM-7PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

WILLIAMS, SHANTRICE

Provider ID: 296007

Board Certified Specialty: No

855 E MADISON AVE
EL CAJON, CA 92020

Phone: (619) 440-2751

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M 8AM-2PM TU-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

CHIROPRACTOR

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

FAMILY PRACTICE


ALGHAMDI, ASMA

Provider ID: 300231

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

RONQUILLO, KAREN AN

Provider ID: 304781

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: 1275160012


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

Medi-Cal Open Panel: Yes




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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



D. دليل مقدمي الخدمات المتخصصين

 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\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP




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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8:30AM-5PM
 Website: N/A

IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1396478400

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

NPI: 1528079357

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

EL CENTRO

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 277248

Board Certified Specialty: No

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287653

Board Certified Specialty: No

📍 1415 ROSS AVE

EL CENTRO, CA 92243

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

MINOKADEH, ANUSHIRVAN

Provider ID: 277351

Board Certified Specialty: Yes

📍 1415 ROSS AVE

EL CENTRO, CA 92243

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1053339093

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, TEMECULA

VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

RODRIGUEZ-MINETTE,

JESSICA

Provider ID: 277410

Board Certified Specialty: No

📍 1415 ROSS AVE

EL CENTRO, CA 92243

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1164809950

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

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PITTMAN, LILIANA

Provider ID: 285963

Board Certified Specialty: No

1415 ROSS AVE

EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1326599002

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

TABAREZ, NORMA

Provider ID: 272979

Board Certified Specialty: No

1415 ROSS AVE

EL CENTRO, CA 92243

Phone: (866) 803-2262

After Hours Phone: (866) 803-2262

Provider Gender: Female

NPI: 1538535570

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271137

Board Certified Specialty: No

1415 ROSS AVE

EL CENTRO, CA 92243

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239878

Board Certified Specialty: No

1415 ROSS AVE

EL CENTRO, CA 92243

Phone: (760) 339-7100

After Hours Phone: (760) 339-7100

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242543

Board Certified Specialty: No

1415 ROSS AVE

EL CENTRO, CA 92243

Phone: (800) 926-8273

After Hours Phone: (800)

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN
Provider ID: 240024
Board Certified Specialty: No
 1415 ROSS AVE
EL CENTRO, CA 92243
 Phone: (760) 339-7100
 After Hours Phone: (760)
339-7100
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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

HUTCHISON, HEIDI
Provider ID: 272661
Board Certified Specialty: No
 1415 ROSS AVE
EL CENTRO, CA 92243
 Phone: (760) 339-7100
Fax: (760) 352-7612
 After Hours Phone: (760)
339-7100

Provider Gender: Female
NPI: 1417483587
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SIERRA
VISTA REGIONAL MED CTR,
TWIN CITIES COMMUNITY
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

ICHWAN, DANIEL
Provider ID: 283222
Board Certified Specialty: No
 1415 ROSS AVE
EL CENTRO, CA 92243
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1740711589
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL
CENTRO REGIONAL MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group






EMERGENCY MEDICINE




MUELLER, MATTHEW
Provider ID: 280659
Board Certified Specialty: No
 1415 ROSS AVE

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EL CENTRO, CA 92243
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group


EMERGENCY MEDICINE

RUDOLF, FRANCES
 Provider ID: 240161
 Board Certified Specialty: No
 1415 ROSS AVE
 EL CENTRO, CA 92243
 Phone: (760) 339-7000
 After Hours Phone: (760) 339-7000
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

EMERGENCY MEDICINE

TANAKA, HIDEAKI
 Provider ID: 239824
 Board Certified Specialty: Yes
 1415 ROSS AVE
 EL CENTRO, CA 92243
 Phone: (800) 826-8273
 After Hours Phone: (800) 826-8273
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 8AM-8PM
 M-F 8AM-5PM

SA 8AM-8PM
 Website: N/A
 IPA: UCSD Medical Group

INFECTIOUS DISEASE

AKRAMI, KEVAN
 Provider ID: 277342
 Board Certified Specialty: No
 1415 ROSS AVE
 EL CENTRO, CA 92243
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1225364052
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, TEMECULA VALLEY HOSPITAL INC, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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INFECTIOUS DISEASE

SWEENEY, DANIEL

Provider ID: 277369

Board Certified Specialty: No

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497892954

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

AMANN, CHRISTOPHER

Provider ID: 277245

Board Certified Specialty: No

1415 ROSS AVE
EL CENTRO, CA 92243

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 277388

Board Certified Specialty: No

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093791014

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST
HEALTHCARE INLAND

VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

GOWDA, ASHWIN

Provider ID: 277348

Board Certified Specialty: No

1415 ROSS AVE
EL CENTRO, CA 92243

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366736092

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL): JOHN SALLY THORNTON

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE


RAMNATH, VENKTESH


Provider ID: 277358

Board Certified Specialty: No

 1415 ROSS AVE


EL CENTRO, CA 92243

 Phone: (760) 339-7202

 After Hours Phone: (760) 339-7202

Provider Gender: Male

NPI: 1215911730

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA

VALLEY HOSPITAL INC,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

EL CENTRO REGIONAL

MEDICAL CENTER, UCSD

MEDICAL CTR, HEALDSBURG

HOSPITAL, Providence

Redwood Memorial Hospital,

Providence Redwood Memorial

Hospital, UCSD LA JOLLA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE


TRAN, LINH

Provider ID: 277391

Board Certified Specialty: No

 1415 ROSS AVE

EL CENTRO, CA 92243

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE


WARDI, GABRIEL


Provider ID: 277341

Board Certified Specialty: No

 1415 ROSS AVE

EL CENTRO, CA 92243

 Phone: (760) 339-7202

 After Hours Phone: (760) 339-7202

Provider Gender: Male

NPI: 1720346083

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, EL CENTRO

REGIONAL MEDICAL CENTER,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

TEMECULA VALLEY HOSPITAL

INC, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 244089

Board Certified Specialty: No

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (855) 543-0555

Fax: (888) 539-8781

After Hours Phone: (855)
543-0555

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ENCINITAS

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 8AM-8PM

M-F 8AM-8PM

SA 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

SRILASAK, MICHELE

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 281856

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ

Provider ID: 282164

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: Male

NPI: 1144486929

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, EARL AND

LORRAINE MILLER

CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,

Providence St Joseph Hospital,

Providence St Jude Medical

Center, ORANGE COAST MEM

MED CTR, FOUNTAIN VALLEY

REGIONAL HOSP AND MED

CTR, FOUNTAIN VALLEY




REGIONAL HOSP AND MED

CTR, CORONA REGIONAL

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D. دليل مقدمي الخدمات المتخصصين

MED CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE


RUBENZI, 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\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

MATERNAL AND FETAL MEDICINE

HULL, ANDREW

Provider ID: 209483

Board Certified Specialty: No

 781 GARDEN VIEW CT STE
200

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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 MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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


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

NEONATAL / PERINATAL

MEDICINE


BAI-TONG, SHIYU


Provider ID: 283286

Board Certified Specialty: No

 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

N

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

JINDAL, ANUJA

Provider ID: 206264

Board Certified Specialty: No

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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: 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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293447
Board Certified Specialty: No
📍 781 GARDEN VIEW CT STE
200
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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291336
Board Certified Specialty: No
📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 208682

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: 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

SHAH, NEMI

Provider ID: 272578

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: 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p> 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 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network</p>	<p>CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group</p>	<p>N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network</p>
OPHTHALMOLOGY		
<p>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</p>	<p>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):</p>	<p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M 9AM-5PM TU 8:30AM-4:30PM W 7:30AM-4:30PM TH 9:30AM-5PM F 8:30AM-4PM  Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</p>

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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






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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N



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 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP




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\None


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP



PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287134
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: 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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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 8AM-5PM*
 *Website: N/A*

IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



PROVIDER

 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM



 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

PULMONARY DISEASES



BAUTISTA, JENNIFER

Provider ID: 297957
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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

☑ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

ESCONDIDO

**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

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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
☐ 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 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-4PM

SA 7AM-4PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

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D. دليل مقدمي الخدمات المتخصصين

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

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

WALDRUP, LA'RHONDA

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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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\None

American Sign Language (ASL): IPA: Community Care IPA LLC

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC

**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) 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT,
 Community Care IPA LLC

**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

Spoken: Farsi
 Cultural Competency: N
 Hospital Affiliation: PALOMAR
 HEALTH, PALOMAR MEDICAL
 CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: BLUE SHIELD PROMISE
 HEALTH PLAN DIRECT,
 Community Care IPA LLC

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC

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,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

PALOMAR HEALTH, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295845

Board Certified Specialty: No

 488 E VALLEY PKWY STE

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D. دليل مقدمي الخدمات المتخصصين

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network, UCSD Medical Group

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 HOSPITAL,
 SOUTHWEST HEALTHCARE

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D. دليل مقدمي الخدمات المتخصصين


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


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)




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D. دليل مقدمي الخدمات المتخصصين




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):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network




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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 277891

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-4:30PM
F 9AM-2PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
Rady Childrens Health
Network

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

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 9AM-4:30PM

F 9AM-2PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-4:30PM
F 9AM-2PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-4:30PM
F 9AM-2PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
Rady Childrens Health
Network

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





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D. دليل مقدمي الخدمات المتخصصين

 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\19

American Sign Language (ASL): N


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


American Sign Language (ASL):  Accessibility: CONTACT PROVIDER

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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


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

OPHTHALMOLOGY

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 CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-4PM
W-F 8:30AM-1PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 9AM-5PM

TU 8:30AM-4:30PM


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

W 7:30AM-4:30PM

TH 9:30AM-5PM

F 8:30AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين


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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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

 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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health


Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 277867

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303783

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100

PEDIATRIC EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 277865

Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

Phone: (760) 739-1543

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

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

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D. دليل مقدمي الخدمات المتخصصين








 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A

IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

OZAKI, YOSHIHIRO
Provider ID: 277902

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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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health
Network

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ *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 PROVIDER*

🕒 *Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM*

🌐 *Website: N/A
IPA: Rady Childrens Health Network*

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 8AM-5PM*

🌐 *Website: N/A
IPA: Rady Childrens Health Network*

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM*

🌐 *Website: N/A
IPA: Rady Childrens Health Network*

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health Network

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
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 8AM-5PM
 Website: N/A

IPA: Rady Childrens Health
 Network

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):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295277

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PHYSICIANS ASSISTANT

BEITTER, KEERSTIN

Provider ID: 300094

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: 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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

CORVINI, NICOLAS

Provider ID: 296999

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

PODIATRIST

READ, TRENTON

Provider ID: 300882

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

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 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-0PM

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

SUOZZO, JOSEPH

Provider ID: 290758

Board Certified Specialty: No

425 N DATE ST
ESCONDIDO, CA 92025

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ Phone: (760) 520-8340

Fax: (858) 633-4698

📞 After Hours Phone: (760) 520-8340

Provider Gender: Male

NPI: 1821013228

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: IHP of Southern Cal-PHP


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\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM



 Website: N/A
IPA: Community Care IPA LLC

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 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

RADIATION ONCOLOGY

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VOLPP, PAUL

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 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

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

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-6PM

Website: N/A

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IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296924

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 7AM-7PM
M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

GROVE, JAY

Provider ID: 245226

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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)
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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: Community Care IPA LLC


SURGERY ORTHOPEDIC

SHARP, LORRA

Provider ID: 304761

Board Certified Specialty: No

 2130 CITRACADO
PKWY STE 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: Community Care IPA LLC


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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: TU-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

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 8AM-8PM
F 8AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

STOJANOVSKA, JOVANA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

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 8AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1841627759

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: TU 8AM-5PM
TH-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-4PM








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 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


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
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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER






 Hours: M-F 8AM-5PM




 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

THYGERSEN, ALAYSA

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified Specialty: No

949 PALM AVE
IMPERIAL BEACH, CA
91932

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8:30AM-8PM

TU-W 8:30AM-5PM

TH 8:30AM-8PM

F 8:30AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 7AM-7PM

F 7AM-5PM

SA 8AM-1PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

REGISTERED PHYSICAL

THERAPIST

JIMENEZ, ANDREA

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-6PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M 7AM-7PM

TU 7AM-0PM

W-TH 7AM-7PM

F 7AM-0PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 7AM-7PM
F 7AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

LA JOLLA

ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

HONG, KIMBERLY

Provider ID: 246312

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: 1346515442

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

☎ *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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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\None



American Sign Language (ASL):
N

Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272805
Board Certified Specialty: No
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL

CARE MEDICINE

KRAUSE, MARTIN

Provider ID: 280540

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: 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CARDIOVASCULAR DISEASE

KEEN, WILLIAM

Provider ID: 291303

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304135

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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)
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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):


N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group

CERTIFIED NURSE 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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group

CERTIFIED NURSE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):


N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group


CERTIFIED NURSE PRACTITIONER

MATTHESS, JANETTE

Provider ID: 287645

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: 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **MOHEBBI, ATHENA**

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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 Website: N/A
IPA: UCSD Medical Group


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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group



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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

















American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

<p>CERTIFIED REGISTERED NURSE ANESTHETIST</p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>926-8273 Provider Gender: Male NPI: 1174893358  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p> Website: N/A IPA: UCSD Medical Group</p> <p>CERTIFIED REGISTERED NURSE ANESTHETIST</p> <p>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\None American Sign Language (ASL): N</p>
<p>CERTIFIED REGISTERED NURSE ANESTHETIST</p> <p>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)</p>	<p>CERTIFIED REGISTERED NURSE ANESTHETIST</p> <p>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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM</p>	<p> Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p> <p>CERTIFIED REGISTERED NURSE ANESTHETIST</p> <p>FERRITER, STACY Provider ID: 265296</p>

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D. دليل مقدمي الخدمات المتخصصين

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

POLIKOWSKI, SAMANTHA

Provider ID: 291443

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE ANESTHETIST

RAMIREZ, NICOLE

Provider ID: 291403

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210051

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

After Hours 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\None

American Sign Language (ASL): **HIRSCH, JENNIFER**

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM
W 8AM-8PM

TH-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED

NURSE MIDWIFE

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-5PM
W 8AM-8PM

TH-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1235670977


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270335

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BLACK, NICHOLAS

Provider ID: 284415

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: 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-8PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): N
IP: UCSD Medical Group

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N
IP: UCSD Medical Group

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N
IP: UCSD Medical Group

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

HOGUE, BRENNIA

Provider ID: 301710

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: 1043705296

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N
IP: UCSD Medical Group

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

HORNBEAK, KIRSTEN

Provider ID: 240023

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 246900

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: 1366761959

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

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D. دليل مقدمي الخدمات المتخصصين

RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-8PM

M-F 8AM-5PM

SA 8AM-8PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285609

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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

🗨 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 8AM-8PM

M-F 8AM-5PM

SA 8AM-8PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

SABHA, MAHMOUD




Provider ID: 240450




Board Certified Specialty: No

📍 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037





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 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\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: SU 8AM-8PM
 M-F 8AM-5PM
 SA 8AM-8PM
 Website: N/A
 IPA: UCSD Medical Group

EMERGENCY MEDICINE




SELTZER, JUSTIN

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1336502095

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


ENDOCRINOLOGY METABOLISM DIABETES


BOEDER, SCHAFER

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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
SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY


METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255623

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 962-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA

Provider ID: 256092

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: 1518163799

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

FEMALE PELVIC MED AND


RECONSTRUCTIVE SURG


LUKACZ, EMILY

Provider ID: 256954

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: 1750339446

 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: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

FEMALE PELVIC MED AND


RECONSTRUCTIVE SURG


LUKACZ, EMILY

Provider ID: 256953

Board Certified Specialty: No


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8745

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1750339446

 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: 16\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270449

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


GASTROENTEROLOGY

DAVE, SHRAVAN


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

GASTROENTEROLOGY

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ


Provider ID: 282165

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: 1144486929

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, EARL AND

LORRAINE MILLER

CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,

Providence St Joseph Hospital,

Providence St Jude Medical

Center, ORANGE COAST MEM

MED CTR, FOUNTAIN VALLEY

REGIONAL HOSP AND MED

CTR, FOUNTAIN VALLEY

REGIONAL HOSP AND MED

CTR, CORONA REGIONAL

MED CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,


UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303058

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU-SA 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين

JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY


WANG, HUAN YOU

Provider ID: 247584


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: 1689633729

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU

Provider ID: 275792

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: 1689633729

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


HEPATOLOGY


BARMAN, PRANAB

Provider ID: 241954

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: 1023301991

 Provider English Spoken: Y

 Provider Language(s)

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D. دليل مقدمي الخدمات المتخصصين

Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB
Provider ID: 241952
Board Certified Specialty: No
9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1023301991
Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, 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)
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 275070
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: 1033128376
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

HOSPITALIST MD/DO

CHILDERS, DIANA
Provider ID: 275069
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1033128376

☑ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO

FIRESTEIN, CATHERINE

Provider ID: 275388

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: 1427348382

☑ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO

HAMMOND, CHARLES

Provider ID: 278589

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: 1033641816

☑ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO

SHINDO, YURI

Provider ID: 284744

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: 1700271939

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

HOSPITALIST MD/DO

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TONG, ALEXANDER

Provider ID: 300046

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: 1356804926

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

INFECTIOUS DISEASE

TANG, MICHAEL

Provider ID: 300063

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273985

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

HOSPITAL PRESBYTERIAN,

UCSD MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

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\None


American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):



N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273963
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N




























Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group



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<p>INTERNAL MEDICINE</p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>
<p>INTERNAL MEDICINE</p> <p>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</p>	<p>INTERNAL MEDICINE</p> <p>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</p>	<p>INTERNAL MEDICINE</p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT</p>

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D. دليل مقدمي الخدمات المتخصصين









PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE









ALOTAIBI, MONA

Provider ID: 271480
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: 1174933915
 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BOROK, ZEA








Provider ID: 284703
Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-5273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-5273
Provider Gender: Female
NPI: 1750317251
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR, Los
Angeles General Medical
Center, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

ODISH, MAZEN




Provider ID: 271468
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: 1992141428
 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE










CRITICAL CARE MEDICINE

TRAN, LINH

Provider ID: 271938
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: 1851682728

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D. دليل مقدمي الخدمات المتخصصين

<p> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>CENTRO REGIONAL MEDICAL CENTER Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group</p>
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INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL
Provider ID: 275993
Board Certified Specialty: No
 9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
 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


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

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

SA 9AM-4PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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
 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\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

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\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):





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D. دليل مقدمي الخدمات المتخصصين

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group





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
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network





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

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\None
 American Sign Language (ASL):

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

NEONATAL / PERINATAL MEDICINE

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

MATوبا, 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 DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19


American Sign Language (ASL):

N

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 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: Rady Childrens Health Network

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*

IPA: Rady Childrens Health Network


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 8AM-5PM*

 *Website: N/A*

IPA: Rady Childrens Health Network


 *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 8AM-5PM*

 *Website: N/A*

IPA: Rady Childrens Health Network


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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

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
IPA: Rady Childrens Health
Network

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


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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

LEE, DAVID

Provider ID: 246264

Board Certified Specialty: No





 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين





 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

NEUROLOGY

QAYOUMI, WALI
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\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NUCLEAR MEDICINE

SHARIF TABRIZI, AHMAD

Provider ID: 300029

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: 1053727313

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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 Website: N/A
IPA: UCSD Medical Group


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

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291334

Board Certified Specialty: No

 9300 CAMPUS POINT DR

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

HOANG, MAI
Provider ID: 208295

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM


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 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group



OBSTETRICS / GYNECOLOGY

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A


IPA: UCSD Medical Group


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\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **MELLENDEZ, ARIANA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: UCSD Medical Group


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

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PINSON, KELSEY

Provider ID: 284285

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272787

Board Certified Specialty: No

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 7AM-5PM
SA 7:45AM-2PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OPHTHALMOLOGY

JIN, MAN

Provider ID: 299956

Board Certified Specialty: No

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

NPI: 1629509336

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8:30AM-4PM
W-F 8:30AM-1PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group


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\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP, UCSD Medical Group</p>	<p> 9415 CAMPUS POINT DR LA JOLLA, CA 92093</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1437689536</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Chinese, Mandarin</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p>Provider Gender: Female</p> <p>NPI: 1215468376</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>
<hr/> <p>OPHTHALMOLOGY</p> <p>SHEILS, CATHERINE</p> <p>Provider ID: 299937</p> <p>Board Certified Specialty: No</p> <p> 9415 CAMPUS POINT DR LA JOLLA, CA 92093</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1932605649</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP, UCSD Medical Group</p>	<p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>
<hr/> <p>OPHTHALMOLOGY</p> <p>SONG, DELU</p> <p>Provider ID: 284425</p> <p>Board Certified Specialty: No</p>	<hr/> <p>OPHTHALMOLOGY</p> <p>TOPILOW, NICOLE</p> <p>Provider ID: 284348</p> <p>Board Certified Specialty: No</p> <p> 9415 CAMPUS POINT DR LA JOLLA, CA 92093</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p>	<hr/> <p>OPTOMETRIST</p> <p>AOTO, KIM</p> <p>Provider ID: 296798</p> <p>Board Certified Specialty: No</p> <p> 9850 GENESEE AVE STE 310 LA JOLLA, CA 92037</p> <p> Phone: (800) 898-2020</p> <p>Fax: (844) 897-3788</p> <p> After Hours Phone: (800) 898-2020</p> <p>Provider Gender: Female</p> <p>NPI: 1780935650</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Vietnamese</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Website: N/A
N
IPA: Community Care IPA LLC

Accessibility: CONTACT PROVIDER

Hours: M 9AM-5PM
TU 8:30AM-4:30PM
W 7:30AM-4:15PM
TH 9:30AM-5PM
F 8:30AM-4PM

Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A
IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


NPI: 1639697451


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299633

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

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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)

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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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
 3855 HEALTH SCIENCES
 DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273

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\None
 American Sign Language (ASL):
 N




 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group


OTOLARYNGOLOGY

COFFEY, CHARLES
 Provider ID: 299584
 Board Certified Specialty: No

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

NPI: 1588988919

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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,

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): CTR

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299563

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: 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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299557

Board Certified Specialty: Yes

 9400 CAMPUS POINT DR

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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
NPI: 1144583931
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<p> 9300 CAMPUS POINT DR LA JOLLA, CA 92037</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1417988783</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<p>MEMORIAL HOSPITAL, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>
<hr/> <p>OTOLARYNGOLOGY</p> <p>HARRIS, JEFFREY</p> <p>Provider ID: 299577</p> <p>Board Certified Specialty: No</p> <p> 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1417988783</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<hr/> <p>OTOLARYNGOLOGY</p> <p>HARRIS, JEFFREY</p> <p>Provider ID: 299574</p> <p>Board Certified Specialty: No</p> <p> 9350 CAMPUS POINT DR LA JOLLA, CA 92037</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1417988783</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS</p>	<hr/> <p>OTOLARYNGOLOGY</p> <p>HARRIS, JEFFREY</p> <p>Provider ID: 299573</p> <p>Board Certified Specialty: No</p> <p> 9400 CAMPUS POINT DR LA JOLLA, CA 92093</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1417988783</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>
<hr/> <p>OTOLARYNGOLOGY</p> <p>HARRIS, JEFFREY</p> <p>Provider ID: 299578</p> <p>Board Certified Specialty: No</p>		

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

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D. دليل مقدمي الخدمات المتخصصين

HUSSEMAN, JACOB

Provider ID: 301051

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group</p>	<p>Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group</p>	<p>N Accessibility: CONTACT PROVIDER Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group</p>
OTOLARYNGOLOGY		
<p>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 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</p>	<p>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\None American Sign Language (ASL):</p>	<p>N Accessibility: CONTACT PROVIDER Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group</p>
OTOLARYNGOLOGY		
<p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: Rady Childrens Health Network, UCSD Medical Group</p>		
OTOLARYNGOLOGY		
<p>MAGIT, ANTHONY Provider ID: 299479</p>		

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p>OTOLARYNGOLOGY</p> <p>NGUYEN, QUYEN</p> <p>Provider ID: 299605</p> <p>Board Certified Specialty: No</p> <p> 9400 CAMPUS POINT DR LA JOLLA, CA 92093</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1477524452</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Vietnamese</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p>OTOLARYNGOLOGY</p> <p>NGUYEN, QUYEN</p>	<p>Provider ID: 299608</p> <p>Board Certified Specialty: No</p> <p> 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1477524452</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Vietnamese</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p>OTOLARYNGOLOGY</p> <p>VAHABZADEH-HAGH, ANDREW</p> <p>Provider ID: 299504</p> <p>Board Certified Specialty: No</p> <p> 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093</p> <p> Phone: (858) 822-6197</p> <p> After Hours Phone: (858) 822-6197</p>	<p>822-6197</p> <p>Provider Gender: Male</p> <p>NPI: 1346506920</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p>OTOLARYNGOLOGY</p> <p>VAHABZADEH-HAGH, ANDREW</p> <p>Provider ID: 299510</p> <p>Board Certified Specialty: No</p> <p> 9300 CAMPUS POINT DR LA JOLLA, CA 92037</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1346506920</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: RONALD</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

WATSON, DEBORAH

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1346270816

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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,






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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
 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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC


FADARE, OLUWOLE

Provider ID: 275706
 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: 1619955804
 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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

HANSEN, LAWRENCE

Provider ID: 275768
 Board Certified Specialty: No
 9444 MEDICAL CENTER DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1760407498

☑ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA

Provider ID: 275889

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: 1629163100

☑ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PATEL, CHARMI

Provider ID: 259112

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: 1730389362

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Gujarati, Hindi

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

WONG, RICHARD

Provider ID: 275815

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: 1275084295

☑ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL








AISAGBONHI, OMONIGHO

Provider ID: 275750

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين






 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL

AISAGBONHI, OMONIGHO









Provider ID: 201304

 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

BROOME, HELEN

Provider ID: 275722

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

NPI: 1295912657

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): IPA: UCSD Medical Group
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL

Provider ID: 275735

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

NPI: 1174679849


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, EL CENTRO REGIONAL
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


PATHOLOGY CLINICAL

LE DZUNG, THE

Provider ID: 275733

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: 1770526931

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT


ALBRIGHT, KELSEY

Provider ID: 284764

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: 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ALLERS, JENNA

Provider ID: 301037

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

☎ *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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🌐 *Website: N/A*

IPA: IHP of Southern Cal-PHP

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) 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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: UCSD Medical Group

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*

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298429

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: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

LIN, JOYCE

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


<hr/> PHYSICIANS ASSISTANT <hr/> 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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
<hr/> PHYSICIANS ASSISTANT <hr/> 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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
<hr/> PHYSICIANS ASSISTANT <hr/> 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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
<hr/> PHYSICIANS ASSISTANT <hr/> MCADAMS, JOSEPH Provider ID: 280612 Board Certified Specialty: No 9300 CAMPUS POINT DR LA JOLLA, CA 92037	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	Phone: (800) 926-8273 Fax: (888) 539-8781 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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 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\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


PELIO, DARREN

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\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group




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\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group


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\None
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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) 926-8273

Provider Gender: Female

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): Board Certified Specialty: No

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 8AM-8PM

M-F 8AM-5PM

SA 8AM-8PM

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247976

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N







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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

PHYSICIANS ASSISTANT




SPEH, BRIAN

Provider ID: 305010
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: 1124593926
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group



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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

Provider Gender: Male

NPI: 1588739452

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

DUARTE, KRISTEN

Provider ID: 255480

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

EICHEN, DAWN

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

LASSWELL, EVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

MAGINOT-CHESSER, 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

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D. دليل مقدمي الخدمات المتخصصين

REED, KRISTIE

Provider ID: 302867

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: 1679869556

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **CARSWELL, AIMEE**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

IPA: UCSD Medical Group


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

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: UCSD Medical Group

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 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


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

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D. دليل مقدمي الخدمات المتخصصين

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240343

Board Certified Specialty: No

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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 JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE

Provider ID: 268249
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: 1356478929

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246021
Board Certified Specialty: No
9350 CAMPUS POINT DR

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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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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
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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER





اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST


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\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY CRITICAL CARE

ADAMS, LAURA

Provider ID: 284408

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: 1144616541

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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IPA: UCSD Medical Group

SURGERY CRITICAL CARE

POTENZA, BRUCE

Provider ID: 277299

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 543-7200

After Hours Phone: (619)
543-7200

Provider Gender: Male

NPI: 1548281496

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

VENTRO, GEORGE

Provider ID: 284419

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: 1548604648

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

WEAVER, JESSICA

Provider ID: 243240

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: 1396044657

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None


American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER






Hours: M-F 8AM-5PM




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 Website: N/A
IPA: UCSD Medical Group

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
 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\None
American Sign Language (ASL): N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 272304

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL

Provider ID: 284935

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: 1578058665

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL

Provider ID: 284936

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: 1578058665

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

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JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): **BEN-HAIM, SHARONA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


SURGERY NEUROLOGICAL

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL):
 N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group


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

Min/Max Age: 0\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group

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






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Website: N/A
IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group


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\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):






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N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285246
 Board Certified Specialty: No

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

NPI: 1407380512

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group




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\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

KEARNS, MARK

Provider ID: 274297

Board Certified Specialty: No

📍 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

☎ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291382

Board Certified Specialty: No

📍 3855 HEALTH SCIENCES

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM
Website: N/A

IPA: Community Care IPA LLC

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\None


American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5PM



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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

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\None

American Sign Language (ASL): Provider ID: 217692

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER


RESTELLI, 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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

CERTIFIED NURSE

PRACTITIONER


RESTELLI, 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

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D. دليل مقدمي الخدمات المتخصصين




<p> 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 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>	<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network</p>	<p> Website: N/A IPA: Rady Childrens Health Network</p>
EMERGENCY MEDICINE		
<p>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</p>	<p>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 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 8AM-5PM</p>	<p>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 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A IPA: Rady Childrens Health Network</p>

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D. دليل مقدمي الخدمات المتخصصين


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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC	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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5PM Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP	GROSSMONT HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5PM Website: N/A IPA: Community Care IPA LLC, IHP of Southern Cal-PHP
HEMATOLOGY / ONCOLOGY	HEMATOLOGY / ONCOLOGY	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, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N	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, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N	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\None American Sign Language (ASL): N




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 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:30AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP



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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5PM*
 *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

INTERVENTIONAL

CARDIOLOGY

TAGHIZADEH, BEHZAD

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

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IPA: Rady Childrens Health Network

MATERNAL AND FETAL MEDICINE

MELBER, DORA

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network


MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277305

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: 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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين



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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

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PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM

TU-W 8:30AM-4PM

TH 8AM-4PM

F 8AM-0PM

 Website: N/A


IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8:30AM-4PM
 F 8AM-0PM

 Website: N/A


IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Min/Max Age: 0\None

N


 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM

TU-W 8:30AM-4PM

TH 8AM-4PM

F 8AM-0PM

 Website: N/A

IPA: Community Care IPA LLC,


IHP of Southern Cal-PHP


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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OTOLARYNGOLOGY

MOSHTAGHI, OMID

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY

MEDICINE

GROSS, MATTHEW

Provider ID: 297177

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: 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








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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM*
 *Website: N/A*
IPA: Rady Childrens Health Network

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 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health

Network





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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM*
 *Website: N/A*
IPA: Rady Childrens Health Network

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 8AM-5PM*

 *Website: N/A*

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARKER, SHERINE

Provider ID: 205786

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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: 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 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health Network

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 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health Network

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 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health Network

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*





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D. دليل مقدمي الخدمات المتخصصين

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 8AM-6PM
SA 11:30AM-3:30PM
 Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

PHYSICIANS ASSISTANT





DOUGHERTY, CLARA



Provider ID: 301590
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: 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA

Provider ID: 306005

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Board Certified Specialty: No
7339 EL CAJON BLVD STE 1
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\None

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

PHYSICIANS ASSISTANT

HINKLE, CORINNE

Provider ID: 305425
Board Certified Specialty: No
7339 EL CAJON BLVD STE 1
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
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

WHITE, KYLE

Provider ID: 302382
Board Certified Specialty: No
5565 GROSSMONT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

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)
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 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

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 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Community Care IPA LLC


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 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


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

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Imperial Health Holdings
Medical Group-SD

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

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Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 UCSD Medical Group

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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP





OPTOMETRIST

TAM, EMILY

Provider ID: 290319
 Board Certified Specialty: No
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 525-2720
 Fax: (760) 414-3892
 After Hours Phone: (951)
 525-2720
 Provider Gender: Female
 NPI: 1497161236

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
D. دليل مقدمي الخدمات المتخصصين



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




 Hours: M-F 8AM-5PM



 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

CHIROPRACTOR

MCCOWN, BARRY

Provider ID: 303816
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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TH 8AM-5PM
 Website: N/A

IPA: IHP of Southern Cal-PHP


LANCASTER

CERTIFIED NURSE PRACTITIONER

JONES, TYESHIA

Provider ID: 306079
Board Certified Specialty: No

 43845 10TH ST W STE 1D
LANCASTER, CA 93534

 Phone: (833) 438-8763
Fax: (833) 438-8700

 After Hours Phone: (833)
438-8763

Provider Gender: Female
NPI: 1104276419

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALMDALE
REGIONAL MEDICAL CENTER,
ST BERNARDINE MED CTR,
CALIFORNIA HOSP MED CTR
LOS ANGELES

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

LOS ANGELES

CERTIFIED NURSE PRACTITIONER

JONES, TYESHIA

Provider ID: 306076

Board Certified Specialty: No

1513 S GRAND AVE STE 200
LOS ANGELES, CA 90015

Phone: (833) 438-8763

Fax: (833) 438-8700

After Hours Phone: (833)
438-8763

Provider Gender: Female

NPI: 1104276419

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALMDALE
REGIONAL MEDICAL CENTER,
ST BERNARDINE MED CTR,
CALIFORNIA HOSP MED CTR
LOS ANGELES

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-5PM

Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

JONES, TYESHIA

Provider ID: 306077

Board Certified Specialty: No

1660 W 3RD ST
LOS ANGELES, CA 90017

Phone: (833) 438-8763

Fax: (833) 438-8700

After Hours Phone: (833)
438-8763

Provider Gender: Female

NPI: 1104276419

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALMDALE
REGIONAL MEDICAL CENTER,
ST BERNARDINE MED CTR,
CALIFORNIA HOSP MED CTR
LOS ANGELES

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-5PM

Website: N/A

IPA: Community Care IPA LLC

PSYCHOLOGIST

CALANDRA, JOAN

Provider ID: 289989

Board Certified Specialty: No

11911 SAN VICENTE BLVD
STE 280
LOS ANGELES, CA 90049

Phone: (310) 433-7723

After Hours Phone: (310)
433-7723

Provider Gender: Female

NPI: 1730173865

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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MORENO VALLEY

OPTOMETRIST

BULLUM, ANTHONY

Provider ID: 290330

Board Certified Specialty: No

22675 ALESSANDRO BLVD
MORENO VALLEY, CA
92553

Phone: (951) 571-2350

Fax: (951) 571-2370

After Hours Phone: (951)
571-2350

Provider Gender: Male

NPI: 1992773956

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CARDIAC

ELECTROPHYSIOLOGY

HAN, FREDERICK

Provider ID: 210100

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: 1427255967

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287655

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)

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

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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-0PM
M-F 8AM-5PM

SA 8:30AM-0PM

 Website: N/A

IPA: Rady Childrens Health
Network

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
Cultural Competency: N



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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):








N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None



American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BEGOVIC, ADNAN
Provider ID: 210826
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: 1093791014
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SOUTHWEST
HEALTHCARE INLAND
VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

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CHEN, KENNETH

Provider ID: 283132

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: 1720472657

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

PATEL, SAGAR

Provider ID: 283001

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: 1245672302

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

TRAN, LINH

Provider ID: 202659

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: 1851682728

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

TRAN, LINH

Provider ID: 210573

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: 1851682728

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL




Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): American Sign Language (ASL):








N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group









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\None

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
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

IPA: Rady Childrens Health

Network, UCSD Medical Group

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

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): Network

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

NEUROLOGY CHILD

KIM MCMANUS, OLIVIA



Provider ID: 215666

Board Certified Specialty: No

📍 25170 HANCOCK AVE MURRIETA, CA 92562

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D. دليل مقدمي الخدمات المتخصصين

 Phone: (951) 600-1640
 After Hours Phone: (951) 600-1640

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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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):

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N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network


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
 Min/Max Age: 0\19
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network





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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

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:

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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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


OTOLARYNGOLOGY


CARVALHO, DANIELA

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

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D. دليل مقدمي الخدمات المتخصصين

<p> <i>Provider Language(s)</i> 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  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> IPA: Rady Childrens Health Network</p>	<p>HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> IPA: Rady Childrens Health Network, UCSD Medical Group</p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> IPA: Rady Childrens Health Network, UCSD Medical Group</p>
<u>OTOLARYNGOLOGY</u>		
<p>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  <i>Provider English Spoken: Y</i> 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</p>	<p>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  <i>Provider English Spoken: Y</i> 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):</p>	<p>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  <i>Provider English Spoken: Y</i> 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  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> IPA: Rady Childrens Health Network</p>

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

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

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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)
600-1640

Provider Gender: Male

NPI: 1417222472

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


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Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

IPA: Rady Childrens Health Network


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


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D. دليل مقدمي الخدمات المتخصصين

 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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

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

IPA: Rady Childrens Health
Network

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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**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

IPA: Rady Childrens Health
Network

**PEDIATRIC EMERGENCY
MEDICINE**

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

IPA: Rady Childrens Health
Network

**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

IPA: Rady Childrens Health
Network

**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

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D. دليل مقدمي الخدمات المتخصصين


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

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

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

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 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

IPA: Rady Childrens Health Network

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):  Accessibility: CONTACT PROVIDER

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRICS


LOPEZ, XIMENA

Provider ID: 302857
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: 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 8AM-5PM

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 Website: N/A
 IPA: Rady Childrens Health Network



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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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: 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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





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 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PHYSICAL MEDICINE / REHABILITATION




SKALSKY, ANDREW

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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\None
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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):

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300014
 Board Certified Specialty: No
 25500 MEDICAL CENTER DR MURRIETA, CA 92562
 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): **FAIRBANKS, TIMOTHY**

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY CRITICAL CARE

WEAVER, JESSICA

Provider ID: 248113

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: 1396044657

☑ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

SURGERY GENERAL

KLING, KAREN

Provider ID: 215583

Board Certified Specialty: No

📍 25170 HANCOCK AVE

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health Network


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 8AM-5PM*

 *Website: N/A*


IPA: Rady Childrens Health Network


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


IPA: UCSD Medical Group


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

NPI: 1871752956

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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 9AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-6PM
F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **LIM, IMELDA**

N
Accessibility: CONTACT PROVIDER
Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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

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\None
American Sign Language (ASL):

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\None
American Sign Language (ASL):

N
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\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

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

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)

CERTIFIED NURSE PRACTITIONER









N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC



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D. دليل مقدمي الخدمات المتخصصين









Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU
 8:30AM-5:30PM
 W 10AM-7PM
 TH-F 8:30AM-5:30PM
 Website: N/A
 IPA: Community Care IPA LLC

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
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM
 Website: N/A
 IPA: Community Care IPA LLC,

UCSD Medical Group
 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP






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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

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)

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

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings
Medical Group-SD


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-6PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

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

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D. دليل مقدمي الخدمات المتخصصين

SPECIALTY HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 21\None

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

Community Care IPA LLC,
Rady Childrens Health
Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC,

Rady Childrens Health


Network

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\None

American Sign Language (ASL): HEALTH PLAN DIRECT,


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


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE

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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

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT,

Community Care IPA LLC,

Rady Childrens Health

Network

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\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

HAIGHT, 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None




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American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None



American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC




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\None
 American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-4:30PM
 Website: N/A
 IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين

AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD


REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304531

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: 1336894724

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM

F 7AM-5PM

SA 8AM-1PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC,


IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7AM-6PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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


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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-4PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 7AM-7PM
F 7AM-4PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

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American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M 7AM-7PM
 TU 7AM-0PM
 W-TH 7AM-7PM
 F 7AM-0PM

Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

REGISTERED PHYSICAL THERAPIST

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\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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 8AM-5PM
SA 8AM-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-5PM
W 8AM-7PM

TH-F 8AM-5PM

SA 9AM-6PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

 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\None



American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


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D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

CISZEK, ALEXANDRA

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D. دليل مقدمي الخدمات المتخصصين

Provider ID: 306002

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: Female

NPI: 1578220612

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network


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\None


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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)

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D. دليل مقدمي الخدمات المتخصصين

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
SA 9AM-4PM
 Website: N/A
IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين


 Accessibility: CONTACT PROVIDER
 Hours: TU-W 0PM-8PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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 0PM-8PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-2PM
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-2PM
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network


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) 631-5000

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-2PM
SA 9AM-4PM

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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<p>CERTIFIED REGISTERED NURSE MIDWIFE</p> <p>KELLY, KATHERINE Provider ID: 290312 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: 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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: IHP of Southern Cal-PHP</p> <hr/> <p>CHIROPRACTOR</p> <p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: IHP of Southern Cal-PHP</p>
<p>CERTIFIED REGISTERED NURSE MIDWIFE</p> <p>PERLMAN, TAMARA Provider ID: 290733 Board Certified Specialty: No 2210 MESA DR STE 5 OCEANSIDE, CA 92054 Phone: (760) 757-5841</p>	<p>CERTIFIED REGISTERED NURSE MIDWIFE</p> <p>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</p>	<p>CHIROPRACTOR</p> <p>JU, NATHANIEL Provider ID: 290221 Board Certified Specialty: No</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP

EMERGENCY MEDICINE

PHAM, LILY
Provider ID: 304934
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: 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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

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\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
TU 10AM-7PM
W-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):










N
Accessibility: CONTACT PROVIDER
Hours: M 8AM-5PM
TU 10AM-7PM
W-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE






MARTINEZ, LESLY
Provider ID: 298006
Board Certified Specialty: No




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D. دليل مقدمي الخدمات المتخصصين





 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8AM-5PM
 TU 10AM-7PM
 W-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP





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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP




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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8AM-5PM
 W 8AM-7PM
 TH-F 8AM-5PM
 SA 9AM-4PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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



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D. دليل مقدمي الخدمات المتخصصين




 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KERN
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 14\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
SA 8AM-4:30PM
 Website: N/A
IPA: IHP of Southern Cal-PHP





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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP






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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP




GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ
Provider ID: 282166
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: Male
NPI: 1144486929
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, EARL AND
LORRAINE MILLER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.




D. دليل مقدمي الخدمات المتخصصين



CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, Providence St Joseph Hospital, Providence St Jude Medical Center, ORANGE COAST MEM MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, FOUNTAIN VALLEY REGIONAL HOSP AND MED CTR, CORONA REGIONAL MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group


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 8AM-5PM




 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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):

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D. دليل مقدمي الخدمات المتخصصين

N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

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): Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

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

American Sign Language (ASL):
 N
 ♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

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,




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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network




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\None






American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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)
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\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


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 8AM-5PM
 Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

Min/Max Age: 16\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

OPHTHALMOLOGY

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

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):

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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

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):

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205509

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين


PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




 Hours: M-TU 8:30AM-4PM
W-F 8:30AM-1PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group


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

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





D. دليل مقدمي الخدمات المتخصصين



MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):


 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Hours: SU 8AM-5PM
 M-F 8AM-5PM


 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):






N
 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-5PM
 M-F 8AM-5PM

 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

MORA, WENDY

Provider ID: 290237
 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: 1376958389
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 10AM-7PM
TU-TH 9AM-5PM

F 9AM-0PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 1PM-10PM

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 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297175

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: 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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

 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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (760) 547-1000

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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

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PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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
 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 8AM-5PM

Website: N/A
 IPA: Rady Childrens Health
 Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

KIVIAT, ANNETTE

Provider ID: 302455

Board Certified Specialty: No

📍 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

Provider Gender: Male

NPI: 1629674858

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 9AM-6:15PM
W 9AM-6PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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




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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-5PM
F 8AM-4:30PM*

 *Website: N/A*

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D. دليل مقدمي الخدمات المتخصصين

IPA: IHP of Southern Cal-PHP

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: Rady Childrens Health Network


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 8AM-5PM*

 *Website: N/A*

IPA: Rady Childrens Health Network


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group

PALMDALE


CERTIFIED NURSE PRACTITIONER

JONES, TYESHIA

Provider ID: 306078

Board Certified Specialty: No

 38920 TRADE CENTER DR
PALMDALE, CA 93551


 *Phone: (833) 438-8763*

Fax: (833) 438-8700

 *After Hours Phone: (833) 438-8763*

Provider Gender: Female

NPI: 1104276419

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: PALMDALE REGIONAL MEDICAL CENTER, ST BERNARDINE MED CTR, CALIFORNIA HOSP MED CTR LOS ANGELES

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 7AM-3PM*

 *Website: N/A*

IPA: Community Care IPA LLC

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ 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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-4:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

CERTIFIED NURSE

PRACTITIONER

WRIGHT, KIMBERLY

Provider ID: 256378

Board Certified Specialty: No

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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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

FAMILY PRACTICE

NAJAND, SADAF

Provider ID: 270055

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: 1669769717

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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

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 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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


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\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT,
Community Care IPA LLC

INTERVENTIONAL

CARDIOLOGY

SERRY, ROD

Provider ID: 269471

Board Certified Specialty: No

 15611 POMERADO RD STE

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

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
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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 9AM-4:30PM
F 9AM-1PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 9AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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 9AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

RHEUMATOLOGY

REDDY, SMITHA

Provider ID: 269402

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

15725 POMERADO RD STE 117

POWAY, CA 92064

Phone: (858) 312-1717

Fax: (858) 435-0207

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT, Community Care IPA LLC

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)

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D. دليل مقدمي الخدمات المتخصصين




Spoken: Armenian, Italian,
Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT,
Community Care IPA LLC

SURGERY ORTHOPEDIC

BRIED, JAMES







Provider ID: 269500
Board Certified Specialty: No
 15611 POMERADO RD STE
525
POWAY, CA 92064
 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: Community Care IPA LLC

RIVERSIDE


PHYSICIANS ASSISTANT


DUARTE, ZULMA

Provider ID: 295431
Board Certified Specialty: No
 8856 ARLINGTON AVE
RIVERSIDE, CA 92503
 Phone: (951) 710-3970
Fax: (360) 462-5824
 After Hours Phone: (951)
710-3970
Provider Gender: Female

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NPI: 1245885912

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PHYSICIANS ASSISTANT

NJIE, EMADE

Provider ID: 298710

Board Certified Specialty: No

 8856 ARLINGTON AVE
RIVERSIDE, CA 92503

 Phone: (951) 710-3970

Fax: (360) 462-5824

 After Hours Phone: (951)
710-3970

Provider Gender: Female

NPI: 1881233229

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

ADVANCED HEART FAILURE

AND TRANSPLANT


CARDIOLOGY


HONG, KIMBERLY

Provider ID: 246311

Board Certified Specialty: No


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (858) 657-8530

 After Hours Phone: (858)
657-8530

Provider Gender: Female

NPI: 1346515442

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): Provider ID: 300068

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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


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, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN


HOSPITAL


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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY

SHAW, SUSANNA

Provider ID: 255316

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N


























Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group




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<p>ANESTHESIOLOGY</p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>Provider ID: 246749 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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>
<p>ANESTHESIOLOGY</p> <p>SUYDAM, STEVEN Provider ID: 286569 Board Certified Specialty: No  200 W ARBOR DR SAN DIEGO, CA 92103  Phone: (800) 926-8273</p>	<p>ANESTHESIOLOGY</p> <p>TRIVEDI, SURAJ</p>	<p>ANESTHESIOLOGY</p> <p>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</p>

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 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN

Provider ID: 280539

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: 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 210012
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: 1427255967
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CARDIAC ELECTROPHYSIOLOGY

HAN, FREDERICK
Provider ID: 210099
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: 1427255967
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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group




CARDIOVASCULAR DISEASE

ALANI, ANAS
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
CTR, ARROWHEAD REGIONAL
MEDICAL CENTER, LOMA
LINDA UNIVERSITY MED CTR,
RIVERSIDE COUNTY
REGIONAL MED CTR, LAC
RANCHO LOS AMIGOS
NATIONAL REHAB CENTER,

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D. دليل مقدمي الخدمات المتخصصين




LOS ANGELES COUNTY
HARBOR UCLA MEDICAL
CENTER, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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
CTR, PIONEERS MEMORIAL
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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
CTR, PIONEERS MEMORIAL
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group



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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

CARDIOVASCULAR DISEASE

MIZZELL, ANNA

Provider ID: 214020
Board Certified Specialty: No
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290942

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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

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\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU

8:30AM-5:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

W 10AM-7PM
TH-F 8:30AM-5:30PM
Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BAKER, TANYA

Provider ID: 255625
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243718
Board Certified Specialty: No

4168 FRONT ST

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD

CERTIFIED NURSE PRACTITIONER

CAMARGO-LOWTHERS, ANGELICA
Provider ID: 270981

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

CERTIFIED NURSE PRACTITIONER

CHAVEZ, ALEXANDRIA

Provider ID: 243357

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

COLEMAN, PAGE

Provider ID: 304288

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

COSINO, ANJELICA

Provider ID: 201309

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301725

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): **DEUTSCH, KAREN**

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DEUTSCH, KAREN

Provider ID: 247981

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: 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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female

NPI: 1639638968

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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 Gender: Female

NPI: 1639638968

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

DRISCOLL, SUSAN

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **ERICKSON, LISA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM SA 8AM-2PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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
IPA: Rady Childrens Health Network

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N



♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM SA 8AM-2PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):




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D. دليل مقدمي الخدمات المتخصصين



N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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
 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\None

American Sign Language (ASL):



N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group



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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A
 IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD



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\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 293261

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: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

HARROUSH, 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\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HEAD, KRISTIN

Provider ID: 268656

Board Certified Specialty: No

7920 FROST ST STE 200
SAN DIEGO, CA 92123

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU

8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

HOOPER, BONNIE

Provider ID: 275254

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC</p>	<p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Medi-Cal Open Panel: Yes Min/Max Age: 14\None 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 9AM-4PM Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA Medi-Cal Open Panel: Yes Min/Max Age: 14\None 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 9AM-4PM Website: N/A IPA: IHP of Southern Cal-PHP</p>
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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

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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين








DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A









IPA: IHP of Southern Cal-PHP

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-5PM





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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: Rady Childrens Health Network

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY



Provider ID: 301597

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: 1457670119




 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER

MEDINA, RUBELETA

Provider ID: 296673

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-6PM
F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299649

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

Website: N/A
IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM
TH-F 8:30AM-5:30PM

Website: N/A
IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 201325

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE 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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291348

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: 1336896232

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

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 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None
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 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM

W 8:30AM-7PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM
W 10AM-7PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 293248

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: 1073169769

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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)


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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


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D. دليل مقدمي الخدمات المتخصصين

 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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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

IPA: Rady Childrens Health

Network


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

Provider Gender: Female

NPI: 1659912327

 Provider English Spoken: Y


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D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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 JOHN SALLY

THORNTON, GROSSMONT

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291445

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: 1649934126

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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

NPI: 1285732586

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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

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NPI: 1619370475

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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 8AM-8PM
F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR


Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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)

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D. دليل مقدمي الخدمات المتخصصين

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP




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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


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) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER



 Website: N/A
IPA: Family Health Centers of San Diego

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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8:30AM-5:30PM

 Website: N/A
IPA: Family Health Centers of San Diego

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

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

NPI: 1902368319

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

BARBA, ARNEL

Provider ID: 262186

Board Certified Specialty: No

286 EUCLID AVE STE 109

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD

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

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Imperial Health Holdings
Medical Group-SD

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين


Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):


N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

CERTIFIED REGISTERED NURSE ANESTHETIST

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\None

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

<hr/> CERTIFIED REGISTERED NURSE MIDWIFE <hr/> 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\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group	NPI: 1891752069 ☑ Provider English Spoken: Y ☑ Provider Language(s) Spoken: Spanish Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: UCSD Medical Group	🕒 Hours: M-F 8AM-5PM 🌐 Website: N/A IPA: UCSD Medical Group
<hr/> CERTIFIED REGISTERED NURSE MIDWIFE <hr/> 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\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER	<hr/> CERTIFIED REGISTERED NURSE MIDWIFE <hr/> 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\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER	<hr/> CERTIFIED REGISTERED NURSE MIDWIFE <hr/> 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\None American Sign Language (ASL): N ♿ Accessibility: CONTACT PROVIDER 🌐 Website: N/A IPA: UCSD Medical Group
<hr/> CERTIFIED REGISTERED NURSE MIDWIFE <hr/> 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	<hr/> CERTIFIED REGISTERED NURSE MIDWIFE <hr/> 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	<hr/> CERTIFIED REGISTERED NURSE MIDWIFE <hr/> 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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

NPI: 1780901264

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 9AM-6PM

W 9AM-6PM

F 9AM-2PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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



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D. دليل مقدمي الخدمات المتخصصين

Provider Language(s)

Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
Imperial Health Holdings
Medical Group-SD



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\None

American Sign Language (ASL): N

 Accessibility: CONTACT



PROVIDER

 Hours: M-F 9AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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)








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D. دليل مقدمي الخدمات المتخصصين

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 10AM-6PM
TU 10AM-2PM
W 10AM-6PM
TH 10AM-2PM

F 10AM-6PM
 Website: N/A
IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A
IPA: IHP of Southern Cal-PHP

CHIROPRACTOR


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\None

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM


 Website: N/A
IPA: IHP of Southern Cal-PHP


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








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D. دليل مقدمي الخدمات المتخصصين

CHULA VISTA, YUMA
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A

IPA: Imperial Health Holdings
Medical Group-SD


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
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

AMANN, CHRISTOPHER

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **BARRY, JEFFREY**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A

IPA: UCSD Medical Group

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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 JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270333


Board Certified Specialty: No

 4520 EXECUTIVE DR STE

P2

SAN DIEGO, CA 92121

 Phone: (800) 926-8273


 Fax: (888) 539-8781

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

EMERGENCY MEDICINE


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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

IPA: Rady Childrens Health

Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239879

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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)
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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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)

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-8PM
 Website: N/A
IPA: UCSD Medical Group

EMERGENCY MEDICINE

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\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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D. دليل مقدمي الخدمات المتخصصين

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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: SU 8AM-10PM M-F 8AM-5PM SA 8AM-10PM Website: N/A IPA: UCSD Medical Group	MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
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)	EMERGENCY MEDICINE PARK, JAY Provider ID: 285607 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: 1366478372 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD	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








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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM*
 *Website: N/A*
IPA: Rady Childrens Health Network









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*
IPA: Rady Childrens Health Network





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\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):


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D. دليل مقدمي الخدمات المتخصصين

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-8PM
M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY


METABOLISM DIABETES


BOEDER, SCHAFFER

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

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

N






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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group

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*

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D. دليل مقدمي الخدمات المتخصصين


 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Provider ID: 256091

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ENDOCRINOLOGY

METABOLISM DIABETES


SANTOS CAVAIOLA, TRICIA

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

ENDOCRINOLOGY

METABOLISM DIABETES


VALDEZ, KRISTAL

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,

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D. دليل مقدمي الخدمات المتخصصين

PARADISE VALLEY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\100
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM
 SA 8AM-2:30PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

☎ 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 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM

SA 8AM-2:30PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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)

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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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

HILL, LINDA

Provider ID: 293211

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None


American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


FAMILY PRACTICE

KUROSACA, 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

KUROSACA, 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

 Provider Language(s)
Spoken: Ukrainian

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

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

IPA: IHP of Southern Cal-PHP

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D. دليل مقدمي الخدمات المتخصصين

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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE GERIATRIC

MEDICINE

MILLER, SCOTT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
 Provider ID: 256956
 Board Certified Specialty: No
 4520 EXECUTIVE DR STE 360
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1750339446
 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: 16\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

FEMALE PELVIC MED AND RECONSTRUCTIVE SURG

LUKACZ, EMILY
 Provider ID: 256955
 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: 1750339446
 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: 16\None
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

GASTROENTEROLOGY

ANAND, GOBIND
 Provider ID: 272837
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (619) 543-2347

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299951

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: 1780047597

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): **KUMAR, SOMA**

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

GASTROENTEROLOGY

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

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)

D. دليل مقدمي الخدمات المتخصصين

☎ *After Hours Phone: (760) 294-9260*

Provider Gender: Male

NPI: 1427140839

☑ *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: RADY

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 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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\None

American Sign Language (ASL):




N


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 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP




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\None
 American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group



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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group



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\None
 American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

GENETICS MEDICAL

MARDACH, REBECCA

Provider ID: 241947

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Provider ID: 268653

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): Provider ID: 268652

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

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\None

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

LEE, KAREN

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU

Provider ID: 247585

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: 1689633729

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / PATHOLOGY

WANG, HUAN YOU

Provider ID: 247583

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: 1689633729

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HEPATOLOGY

BARMAN, PRANAB

Provider ID: 241953

Board Certified Specialty: No

4510 EXECUTIVE DR STE 315

SAN DIEGO, CA 92121

Phone: (800) 826-5273

After Hours Phone: (800) 826-5273

Provider Gender: Male

NPI: 1023301991

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


HOSPITALIST MD/DO

CHILDERS, DIANA


Provider ID: 275068
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: 1033128376

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

HOSPITALIST MD/DO

FIRESTEIN, CATHERINE

Provider ID: 275387
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: 1427348382

 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\None

American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<p>Provider ID: 284743</p> <p>Board Certified Specialty: No</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1700271939</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Japanese</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 18\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1356804926</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>
<hr/> <p>HOSPITALIST MD/DO</p> <p>HAMMOND, CHARLES</p> <p>Provider ID: 278588</p> <p>Board Certified Specialty: No</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1033641816</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p>	<hr/> <p>HOSPITALIST MD/DO</p> <p>TONG, ALEXANDER</p> <p>Provider ID: 300045</p> <p>Board Certified Specialty: No</p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p>	<hr/> <p>INFECTIOUS DISEASE</p> <p>ALDOUS, JEANNETTE</p> <p>Provider ID: 290420</p> <p>Board Certified Specialty: No</p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114</p> <p> Phone: (619) 662-4100</p> <p>Fax: (619) 205-6384</p> <p> After Hours Phone: (619) 662-4100</p> <p>Provider Gender: Female</p> <p>NPI: 1073650339</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p>
<hr/> <p>HOSPITALIST MD/DO</p> <p>SHINDO, YURI</p>		


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Provider ID: 258330

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


INFECTIOUS DISEASE

BAMFORD, LAURA


Provider ID: 276546

Board Certified Specialty: No

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


INFECTIOUS DISEASE

DEISS, ROBERT

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\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 277226

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health


Network

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

INFECTIOUS DISEASE

RAJAGOPAL, AMUTHA


Provider ID: 221088

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: 1124465745

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

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



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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
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 9AM-4PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294136

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D. دليل مقدمي الخدمات المتخصصين

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\None

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 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286668

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

GELBERG, ANNA

Provider ID: 285638

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286344

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

NPI: 1154818797

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274003

Board Certified Specialty: No

200 W ARBOR DR

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D. دليل مقدمي الخدمات المتخصصين

SAN DIEGO, CA 92103
Phone: (619) 543-6222
After Hours Phone: (619) 543-6222

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

LEVERONE, NICHOLAS

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

NAIDZIONAK, ULADZISLAU

Provider ID: 290567

Board Certified Specialty: No

7930 FROST ST STE 405
SAN DIEGO, CA 92123

Phone: (858) 237-0572

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: TU 9AM-4PM TH 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

THOMAS, ROBERT

Provider ID: 238929

Board Certified Specialty: Yes

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

YANG, JENNY

Provider ID: 283026

Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 210825

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: 1093791014

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): N


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


American Sign Language (ASL):  Accessibility: CONTACT PROVIDER

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE

CRITICAL CARE MEDICINE


BEGOVIC, ADNAN

Provider ID: 276291


Board Certified Specialty: No

 200 W ARBOR DR STE 3-313

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1093791014

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

INTERNAL MEDICINE


CRITICAL CARE MEDICINE

BEGOVIC, ADNAN

Provider ID: 276290

Board Certified Specialty: No

 555 WASHINGTON ST SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1093791014

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

INTERNAL MEDICINE

CRITICAL CARE MEDICINE


BOROK, ZEA

Provider ID: 284706

Board Certified Specialty: No

 4168 FRONT ST

SAN DIEGO, CA 92103


 Phone: (800) 926-5273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-5273

Provider Gender: Female

NPI: 1750317251

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR, Los

Angeles General Medical

Center, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA

Provider ID: 284705

Board Certified Specialty: No

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800) 926-5273

Provider Gender: Female

NPI: 1750317251

Provider English Spoken: Y

Provider Language(s) Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR, Los

Angeles General Medical

Center, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA

Provider ID: 284704

Board Certified Specialty: No

4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121

Phone: (800) 926-5273

Fax: (888) 539-8781

After Hours Phone: (800) 926-5273

Provider Gender: Female

NPI: 1750317251

Provider English Spoken: Y

Provider Language(s) Spoken: Hebrew

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR, Los

Angeles General Medical

Center, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

ODISH, MAZEN

Provider ID: 271467

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: 1992141428

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

ODISH, MAZEN

Provider ID: 271469

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: 1992141428

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D. دليل مقدمي الخدمات المتخصصين

 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\None

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group




INTERNAL MEDICINE CRITICAL CARE MEDICINE

ODISH, MAZEN

Provider ID: 271466
 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: 1992141428

 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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

INTERNAL MEDICINE CRITICAL CARE MEDICINE

TRAN, LINH



Provider ID: 271939
 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: 1851682728

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR, SOUTHWEST

HEALTHCARE RANCHO
 SPRINGS HOSPITAL




Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM


 Website: N/A
 IPA: UCSD Medical Group




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\None
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300061
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 302987

Board Certified Specialty: No

📍 6402 EL CAJON BLVD STE 102

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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


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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


MATERNAL AND FETAL 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):  Website: N/A

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


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

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM


IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

MATERNAL AND FETAL MEDICINE

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network


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)




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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network




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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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
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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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


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D. دليل مقدمي الخدمات المتخصصين


MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): Medi-Cal Open Panel: Yes

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


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):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


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


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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين

 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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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



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D. دليل مقدمي الخدمات المتخصصين

 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

NEONATAL / PERINATAL MEDICINE




MARC AURELE, KRISHELLE

Provider ID: 206208
 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network, UCSD Medical Group

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network, UCSD Medical Group

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE




MATOBNA, 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network



NEONATAL / PERINATAL MEDICINE




MATOBNA, 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):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network





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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health




Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 CHILDRENS HOSPITAL SAN DIEGO

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health


Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

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D. دليل مقدمي الخدمات المتخصصين

 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
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network


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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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

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

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


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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


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

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

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

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health

Network
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 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): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

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): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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





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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: Rady Childrens Health Network, UCSD Medical Group

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: Imperial Health Holdings
Medical Group-SD




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

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D. دليل مقدمي الخدمات المتخصصين

HOSPITAL SAN DIEGO,
SELECT SPECIALTY HOSPITAL
SAN DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: Imperial Health Holdings
Medical Group-SD


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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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


Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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)
926-8273

Provider Gender: Male

NPI: 1740543784

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

FREDERICK, ALIYA

Provider ID: 283152

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

NEUROLOGY

GOLD, JEFFREY

Provider ID: 283335

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: 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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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)
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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

Cultural Competency: N
Hospital Affiliation: ALVARADO N
HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-4PM
F 8AM-3PM

 Website: N/A


IPA: Community Care IPA LLC

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):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


NEUROLOGY

LEE, DAVID

Provider ID: 246263

Board Certified Specialty: No

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 304197

Board Certified Specialty: No

📍 6655 ALVARADO RD

SAN DIEGO, CA 92120

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

NEUROLOGY

RIGGINS, NINA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


NEUROLOGY

YANG, JENNIFER

Provider ID: 301593

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: 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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


NEUROLOGY CHILD

GRAVES, JENNIFER

Provider ID: 261037

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

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D. دليل مقدمي الخدمات المتخصصين

☎ *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 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health

Network

NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 205825

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: 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 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health

Network

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):

N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health Network

NUCLEAR MEDICINE

SHARIF TABRIZI, AHMAD

Provider ID: 300028

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: 1053727313

☑ *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: Providence St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

🌐 *Website: N/A*

IPA: UCSD Medical Group

NUCLEAR MEDICINE

SHARIF TABRIZI, AHMAD

Provider ID: 300027

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D. دليل مقدمي الخدمات المتخصصين

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: 1053727313

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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

NPI: 1346225356

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 9AM-4PM

Website: N/A

IPA: Rady Childrens Health
Network

OBSTETRICS / GYNECOLOGY

DELCORE, 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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

DELCORE, 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين

<p>N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group</p>	<p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group</p>	<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group</p>
<p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group</p>	<p>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\None</p>	<p>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\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC</p>
<p>OBSTETRICS / GYNECOLOGY DRIEBE, AMY Provider ID: 291337 Board Certified Specialty: No 3750 CONVOY ST STE 312 SAN DIEGO, CA 92111</p>	<p>OBSTETRICS / GYNECOLOGY GROGAN, BRIAN Provider ID: 296001 Board Certified Specialty: No 7011 LINDA VISTA RD</p>	

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271560


Board Certified Specialty: No

16950 VIA TAZON






SAN DIEGO, CA 92127




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN
Provider ID: 205481
Board Certified Specialty: No
 11939 RANCHO BERNARDO RD STE 110
SAN DIEGO, CA 92128
 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-2PM
 Website: N/A
IPA: Rady Childrens Health

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

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IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 10\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Imperial Health Holdings Medical Group-SD


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OBSTETRICS / GYNECOLOGY

MELENDEZ, 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

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
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group	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\None American Sign Language (ASL): N	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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group
<u>OBSTETRICS / GYNECOLOGY</u> 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\None American Sign Language (ASL): N	<u>OBSTETRICS / GYNECOLOGY</u> 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	<u>OBSTETRICS / GYNECOLOGY</u> 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
<u>OBSTETRICS / GYNECOLOGY</u> 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\None American Sign Language (ASL): N	<u>OBSTETRICS / GYNECOLOGY</u> 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	<u>OBSTETRICS / GYNECOLOGY</u> 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

Min/Max Age: 16\None

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284290

Board Certified Specialty: No

4520 EXECUTIVE DR STE
360

SAN DIEGO, CA 92121

Phone: (800) 926-8273

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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D. دليل مقدمي الخدمات المتخصصين

OCCUPATIONAL MEDICINE

CROSS, JOHN

Provider ID: 255322

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9210

After Hours Phone: (619)
471-9210

Provider Gender: Male

NPI: 1205989985

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

ISAKARI, MARCIA

Provider ID: 255368

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-1600

After Hours Phone: (619)
471-1600

Provider Gender: Female

NPI: 1861580771

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese

Cultural Competency: N

Hospital Affiliation: ADVENTIST Provider ID: 206548

HEALTH LODI MEMORIAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL MEDICINE

KIM, JOHN

Provider ID: 255385

Board Certified Specialty: No

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9210

After Hours Phone: (619)
471-9210

Provider Gender: Male

NPI: 1114102639

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272788

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):  Hours: M-F 8AM-5PM
SA 8AM-5PM

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

SA 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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)

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926-8273
 Provider Gender: Female
 NPI: 1073010120
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

OPHTHALMOLOGY

O'HALLORAN, HENRY

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 302925

Board Certified Specialty: No

4844 UNIVERSITY AVE STE
A

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8:30AM-4PM
W-F 8:30AM-1PM

 Website: N/A


IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8:30AM-4PM
W-F 8:30AM-1PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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\None

American Sign Language (ASL):

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N

 **Accessibility: CONTACT PROVIDER**

 **Website: N/A**

IPA: IHP of Southern Cal-PHP, UCSD Medical Group


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 HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**


IPA: IHP of Southern Cal-PHP, UCSD Medical Group

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\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 9AM-5PM**

 **Website: N/A**

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M 9AM-5PM**

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5PM

F 8:30AM-4PM

 **Website: N/A**

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1780935650

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 9AM-5PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5PM
F 8:30AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

OPTOMETRIST

AOTO, KIM

Provider ID: 268723

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8:30AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM
Website: N/A

IPA: UCSD Medical Group

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
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
IPA: UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Female
NPI: 1639697451

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين




HOSPITAL, SCRIPPS MERCY N
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

OSTEOPATHIC MANIPULATIVE THERAPY

PORTERA, ARIEL

Provider ID: 273321
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: 1841721784
 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\None
American Sign Language (ASL):




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299461

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: 1881652972

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health


Network

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299583


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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







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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY





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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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,

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network


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\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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) 926-8273

Provider Gender: Female

NPI: 1144583931

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A
IPA: UCSD Medical Group

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 272660

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 272637

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: 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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 9AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

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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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH,

ANDREW

Provider ID: 299507

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: 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

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D. دليل مقدمي الخدمات المتخصصين

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

OTOLARYNGOLOGY

WEISSBROD, PHILIP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):








N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
IPA: UCSD Medical Group








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
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\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*
IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

FADARE, OLUWOLE

Provider ID: 275705
Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 *Phone: (619) 543-5764*
Fax: (619) 543-5249
 *After Hours Phone: (619) 543-5764*
Provider Gender: Male
NPI: 1619955804
 *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\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group


PATHOLOGY ANATOMIC

HANSEN, LAWRENCE


Provider ID: 275767
Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 *Phone: (619) 543-5764*
 *After Hours Phone: (619) 543-5764*

Provider Gender: Male

NPI: 1760407498

 *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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*





 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

PARAST, MANA

Provider ID: 275888
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: 1629163100
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

WONG, RICHARD

Provider ID: 243202

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: 1275084295

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275721

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

Provider Gender: Female

NPI: 1942561212

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY ANATOMIC CLINICAL

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PATHOLOGY CLINICAL

KELNER, MICHAEL

Provider ID: 247601

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: 1174679849

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, EL CENTRO REGIONAL
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PATHOLOGY CLINICAL

KELNER, MICHAEL

Provider ID: 247602

Board Certified Specialty: No

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174679849

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, EL CENTRO REGIONAL

MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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 Website: N/A
IPA: UCSD Medical Group


PATHOLOGY CLINICAL


LE DZUNG, THE

Provider ID: 247600

Board Certified Specialty: No


 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770526931

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PATHOLOGY CLINICAL


LE DZUNG, THE


Provider ID: 247599

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: 1770526931

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

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):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-0PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC ALLERGY / IMMUNOLOGY

LEIBEL, SYDNEY

Provider ID: 205724

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

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IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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

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CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

GOLDING, IAN

Provider ID: 210823

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: 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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

JUSTINO, HENRI

Provider ID: 284123

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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): Network

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

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

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

STEINBERG, LEONARD

Provider ID: 248208

Board Certified Specialty: No

📍 3020 CHILDRENS WAY

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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

IPA: Rady Childrens Health
Network

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): Network

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 9AM-5PM

Website: N/A

IPA: Rady Childrens Health

PEDIATRIC CARDIOLOGY

VELLORE GOVARDHAN,

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC CARDIOLOGY

WERHO, DAVID

Provider ID: 206316

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

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☎ 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): Network
 N

♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC CARDIOLOGY

YOUNOSZAI, 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 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

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 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM
 🌐 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health
Network

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
Website: N/A
IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

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
IPA: Rady Childrens Health Network

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

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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

IPA: Rady Childrens Health
Network

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

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

IPA: Rady Childrens Health
Network

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







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D. دليل مقدمي الخدمات المتخصصين

RANCHO SPRINGS HOSPITAL, N
 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
 IPA: Rady Childrens Health Network

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): 



 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

CONRAD, HEATHER
 Provider ID: 205960
 Board Certified Specialty: No


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D. دليل مقدمي الخدمات المتخصصين

 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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE




DEVERA, GEMMIE

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
IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19
 American Sign Language (ASL): N
 N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network

IPA: Rady Childrens Health Network

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):

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 8AM-5PM
 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
 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

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 8AM-5PM
SA 8AM-2PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

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 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health

Network

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

IPA: Rady Childrens Health

Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

 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

IPA: Rady Childrens Health Network


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):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

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D. دليل مقدمي الخدمات المتخصصين


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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

LOVEJOY, AMY

Provider ID: 206107

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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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE

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
 IPA: Rady Childrens Health Network, UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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)
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

IPA: Rady Childrens Health

Network


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

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D. دليل مقدمي الخدمات المتخصصين

<p> <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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 <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Website: N/A IPA: Rady Childrens Health Network </p>	<p> DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA Medi-Cal Open Panel: No Min/Max Age: 0\19 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM <input type="checkbox"/> Website: N/A IPA: Rady Childrens Health Network </p>	<p> American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM <input type="checkbox"/> Website: N/A IPA: Rady Childrens Health Network </p>
<hr/> <p><u>PEDIATRIC EMERGENCY MEDICINE</u></p> <hr/>		
<p> MINKA, GENEVIEVE Provider ID: 262107 Board Certified Specialty: No <input type="checkbox"/> 8110 BIRMINGHAM WAY FL 1 SAN DIEGO, CA 92123 <input type="checkbox"/> Phone: (858) 966-7785 <input type="checkbox"/> After Hours Phone: (858) 966-7785 Provider Gender: Female NPI: 1689646689 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: French Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN </p>	<p> MINKA, GENEVIEVE Provider ID: 205336 Board Certified Specialty: No <input type="checkbox"/> 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105 <input type="checkbox"/> Phone: (619) 280-2905 Fax: (619) 283-1614 <input type="checkbox"/> After Hours Phone: (619) 280-2905 Provider Gender: Female NPI: 1689646689 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: French Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN </p>	<p> MISHRA-OCCHINO, SEEMA Provider ID: 205404 Board Certified Specialty: No <input type="checkbox"/> 3020 CHILDRENS WAY SAN DIEGO, CA 92123 <input type="checkbox"/> Phone: (858) 576-1700 <input type="checkbox"/> After Hours Phone: (858) 576-1700 Provider Gender: Female NPI: 1689612830 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN </p>
<p> CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM <input type="checkbox"/> Website: N/A IPA: Rady Childrens Health </p>	<p> DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM <input type="checkbox"/> Website: N/A IPA: Rady Childrens Health </p>	<p> DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM <input type="checkbox"/> Website: N/A IPA: Rady Childrens Health </p>

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Network

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): Network

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health

Network

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): Network

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 302352

Board Certified Specialty: No

3020 CHILDRENS WAY SAN DIEGO, CA 92123

Phone: (858) 966-8800

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ *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*

IPA: Rady Childrens Health Network

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

☎ *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):

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: SU 1PM-10PM*

M-F 4PM-10PM

SA 1PM-10PM

🌐 *Website: N/A*

IPA: Rady Childrens Health Network

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):

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

IPA: Rady Childrens Health Network

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):



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network





PEDIATRIC EMERGENCY 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

N
 Accessibility: CONTACT PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM

 Website: N/A
 IPA: Rady Childrens Health Network




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
 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




N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

RUIZ, MONICA
 Provider ID: 305340
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123

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D. دليل مقدمي الخدمات المتخصصين

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
IPA: Rady Childrens Health Network

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

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D. دليل مقدمي الخدمات المتخصصين

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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health Network

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

IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY

MEDICINE

SCHWARTZ, KRISTY

Provider ID: 206169

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: 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

IPA: Rady Childrens Health Network


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):

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network


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):

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network

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):


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D. دليل مقدمي الخدمات المتخصصين

N


 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PROVIDER


 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


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


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

PEDIATRIC EMERGENCY MEDICINE




TRAN, THERESA

Provider ID: 301834



Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

 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




IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A




IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A



IPA: Rady Childrens Health
Network

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 1PM-10PM
M-F 4PM-10PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

SA 1PM-10PM
Website: N/A
IPA: Rady Childrens Health Network

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

IPA: Rady Childrens Health Network

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

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

IPA: Rady Childrens Health Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health

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
PROVIDER

 Hours: SU 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE

WANG, EMILY

Provider ID: 265954

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

PEDIATRIC ENDOCRINOLOGY

CYMBALUK, 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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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
Provider Gender: Female
NPI: 1952534091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN

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D. دليل مقدمي الخدمات المتخصصين


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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, UCSF BENIOFF


Medi-Cal Open Panel: No


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC

GASTROENTEROLOGY

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D. دليل مقدمي الخدمات المتخصصين

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

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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
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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


PEDIATRIC HEMATOLOGY / ONCOLOGY

DING, HILDA

Provider ID: 206173

Board Certified Specialty: No

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

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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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC HEMATOLOGY / ONCOLOGY

WONG, VICTOR

Provider ID: 206149

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: 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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين




 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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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: 181919244
 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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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
OAKLAND, MEDICAL CTR AT
UCSF, SHARP MEMORIAL
HOSPITAL, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

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American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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


IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

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D. دليل مقدمي الخدمات المتخصصين

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC PULMONOLOGY


CERNELC KOHAN, MATEJKA

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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

☑ 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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC PULMONOLOGY

RAO, APARNA

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D. دليل مقدمي الخدمات المتخصصين

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

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

PEDIATRIC RHEUMATOLOGY


SHEETS, ROBERT

Provider ID: 255900

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1 NPI: 1619083961

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 8AM-4:30PM

 Website: N/A

IPA: Rady Childrens Health Network


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) 966-7484

Provider Gender: Male

 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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


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 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

IPA: IHP of Southern Cal-PHP


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

IPA: IHP of Southern Cal-PHP


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

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

IPA: Rady Childrens Health
Network

PEDIATRICS

CAMERON, MELISSA


Provider ID: 205965

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

 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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

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D. دليل مقدمي الخدمات المتخصصين

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

IPA: IHP of Southern Cal-PHP

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

IPA: IHP of Southern Cal-PHP

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRICS

GIBONEY, JENNIFER

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
SA 8AM-2PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

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
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 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): IPA: Rady Childrens Health
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 8AM-5PM

🌐 Website: N/A

Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

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 10AM-7PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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

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D. دليل مقدمي الخدمات المتخصصين

 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network




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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

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
 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
 Network

PEDIATRICS

MARANO, RACHEL

Provider ID: 302438

Board Certified Specialty: No

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

IPA: Rady Childrens Health
Network, UCSD Medical Group

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


PEDIATRICS

PATEL, AARTI


Provider ID: 205865

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

IPA: Rady Childrens Health Network


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

 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

IPA: Rady Childrens Health
Network, UCSD Medical Group

PEDIATRICS

STOVER, LAURIE






Provider ID: 206196

Board Certified Specialty: No





 3020 CHILDRENS WAY

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D. دليل مقدمي الخدمات المتخصصين

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 CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network






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 MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\18
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network





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
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: Rady Childrens Health

Network, UCSD Medical Group







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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network

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

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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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

ARMEEN, GARY

Provider ID: 247035

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:30PM

F 8:30AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

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

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين


Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT


LINDEMANN, CHRISTINA

Provider ID: 283760

Board Certified Specialty: No

 4510 EXECUTIVE DR STE
325

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MERRILL, COREY

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PERREAU, 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\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):  Phone: (858) 279-0925

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293247


Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

PYLE, ALEXANDRA

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8:30AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

Network

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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




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D. دليل مقدمي الخدمات المتخصصين


 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 287372
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

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D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 9AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


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\None

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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

PSYCHIATRIC-MENTAL

HEALTH NURSE

PRACTITIONER

SIETSMA, ALEXANDRA

Provider ID: 276908

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

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D. دليل مقدمي الخدمات المتخصصين


NPI: 1932522778


 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

PSYCHIATRIC-MENTAL

HEALTH NURSE


PRACTITIONER

SIETSMA, ALEXANDRA

Provider ID: 276909

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: 1932522778

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين


JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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

 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N


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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Website: N/A
IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

NPI: 1114687803

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GIAMONA, KRISTEN

Provider ID: 294171

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: 1376824383

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 296237

Board Certified Specialty: No

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST


MAGINOT-CHESHER, TAMARA

Provider ID: 273223


Board Certified Specialty: No

 4510 EXECUTIVE DR

SAN DIEGO, CA 92121

 Phone: (858) 534-8019

Fax: (858) 534-6727

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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D. دليل مقدمي الخدمات المتخصصين


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):
N

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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group


PSYCHOLOGIST

NORMAN, MARC


Provider ID: 276869

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: 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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

PRINCE, RENEE

Provider ID: 303603

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL): **SCHELLINGER, KRISTON**

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

PSYCHOLOGIST

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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)
280-2058

Provider Gender: Female

NPI: 1215288238

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PUBLIC HEALTH

PREVENTATIVE MEDICINE

SOZANSKI, JESSE

Provider ID: 200925

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: Male

NPI: 1437446622

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider Gender: Male
NPI: 1598150039
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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

📞 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\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-W 9AM-5PM
TH 8AM-1PM
F 9AM-5PM
SA 8AM-11AM

🌐 Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

PULMONARY DISEASES

LE, HUAN

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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 9AM-5PM
TH 8AM-1PM
F 9AM-6PM
SA 8AM-11AM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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
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\None
American Sign Language (ASL): N




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC

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 8AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 8AM-5PM F 8AM-8PM*
 *Website: N/A*
IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD

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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 8AM-5PM F 8AM-8PM*
 *Website: N/A*
IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p> <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="clock"/> Hours: M-F 8:30AM-5PM <input type="globe"/> Website: N/A IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD </p>	<p> Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="clock"/> Hours: M-F 8:30AM-5PM <input type="globe"/> Website: N/A IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD </p>	<p> N <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="globe"/> Website: N/A IPA: Imperial Health Holdings Medical Group-SD </p>
<u>RADIATION ONCOLOGY</u>		
<p> HOOPEES, DAVID Provider ID: 269725 Board Certified Specialty: No <input type="globe"/> 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127 <input type="phone"/> Phone: (858) 649-5100 Fax: (858) 649-5099 <input type="clock"/> After Hours Phone: (858) 649-5100 Provider Gender: Male NPI: 1962520080 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N </p>	<p> MURPHY, JAMES Provider ID: 262401 Board Certified Specialty: No <input type="globe"/> 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127 <input type="phone"/> Phone: (559) 447-4949 Fax: (559) 447-4925 <input type="clock"/> After Hours Phone: (559) 447-4949 Provider Gender: Male NPI: 1730382631 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): </p>	<p> RADIATION ONCOLOGY VOLPP, PAUL Provider ID: 221105 Board Certified Specialty: No <input type="globe"/> 3075 HEALTH CENTER DR SAN DIEGO, CA 92123 <input type="phone"/> Phone: (858) 939-5010 Fax: (858) 939-5021 <input type="clock"/> After Hours Phone: (858) 939-5010 Provider Gender: Male NPI: 1225186232 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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 <input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="clock"/> Hours: M-F 8AM-5PM <input type="globe"/> Website: N/A IPA: Community Care IPA LLC </p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 304207

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 304171

Board Certified Specialty: No

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None


American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271567

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299957

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: 1275700999

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Los

Angeles General Medical
Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271127

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
 IPA: UCSD Medical Group

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: UCSD Medical Group



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\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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 JOHN SALLY

THORNTON, LOMA LINDA

UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

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D. دليل مقدمي الخدمات المتخصصين

N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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

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\None
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N






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D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



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\None
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group



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\None


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group



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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300035
Board Certified Specialty: No
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300034

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: 1285165183

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

CALLAWAY, MALLORY

Provider ID: 287926

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: 1477207611

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER

Provider ID: 286340

Board Certified Specialty: No

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1538312657

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

FISHER, JENNIFER

Provider ID: 286339

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 471-0438

Fax: (619) 543-3763

☎ After Hours Phone: (619) 471-0438

Provider Gender: Female

NPI: 1538312657

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

REGISTERED DIETITIAN / NUTRITIONIST

SIEVERING, DENISE

Provider ID: 268250

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: 1356478929

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

☎ 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\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p>REGISTERED PHYSICAL THERAPIST</p> <hr/> <p>BUNOSKY, ABIGAIL</p> <p>Provider ID: 258304</p> <p>Board Certified Specialty: No</p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Female</p> <p>NPI: 1780018416</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p>REGISTERED PHYSICAL THERAPIST</p> <hr/> <p>CORTEZ, AARON</p>	<p>Provider ID: 279194</p> <p>Board Certified Specialty: No</p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> Phone: (800) 926-8273</p> <p>Fax: (888) 539-8781</p> <p> After Hours Phone: (800) 926-8273</p> <p>Provider Gender: Male</p> <p>NPI: 1639693187</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A</p> <p>IPA: UCSD Medical Group</p> <hr/> <p>REGISTERED PHYSICAL THERAPIST</p> <hr/> <p>COSTELLO, MARK</p> <p>Provider ID: 295634</p> <p>Board Certified Specialty: No</p> <p> 7510 CLAIREMONT MESA BLVD STE 103 SAN DIEGO, CA 92111</p> <p> Phone: (858) 277-2277</p> <p>Fax: (408) 945-4018</p> <p> After Hours Phone: (858)</p>	<p>277-2277</p> <p>Provider Gender: Male</p> <p>NPI: 1710193602</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Arabic, Armenian, Spanish</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 5\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Website: N/A</p> <p>IPA: IHP of Southern Cal-PHP</p> <hr/> <p>REGISTERED PHYSICAL THERAPIST</p> <hr/> <p>DANG, ERIC</p> <p>Provider ID: 258363</p> <p>Board Certified Specialty: No</p> <p> 8929 UNIVERSITY CENTER LN STE 200 SAN DIEGO, CA 92122</p> <p> Phone: (858) 543-3333</p> <p>Fax: (858) 657-1809</p> <p> After Hours Phone: (858) 543-3333</p> <p>Provider Gender: Male</p> <p>NPI: 1891237756</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP




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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A



IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

REGISTERED PHYSICAL THERAPIST

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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D. دليل مقدمي الخدمات المتخصصين


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group




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\None
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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D. دليل مقدمي الخدمات المتخصصين

 Website: N/A
IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group


REGISTERED PHYSICAL THERAPIST

WALKER, JULIE

Provider ID: 258489

Board Certified Specialty: No

 8929 UNIVERSITY CENTER MEDICAL CTR, UCSD LA
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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

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D. دليل مقدمي الخدمات المتخصصين


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

SLEEP MEDICINE


FINCH, CHRISTINA

Provider ID: 299938
Board Certified Specialty: No

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-7283*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-7283*

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\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*
IPA: Rady Childrens Health Network, UCSD Medical Group


SLEEP MEDICINE

FINCH, CHRISTINA

Provider ID: 299939
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: 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\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*
IPA: Rady Childrens Health Network, UCSD Medical Group


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\None
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*
IPA: IHP of Southern Cal-PHP


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
Min/Max Age: 18\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*
IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296930

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7AM-9PM
M-F 7AM-9PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296920

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7AM-7PM
M-F 7AM-7PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7AM-7PM
M-F 7AM-7PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


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

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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)
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\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP

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

N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 7AM-7PM
🌐 Website: N/A
IPA: IHP of Southern Cal-PHP



SPEECH PATHOLOGIST

O'DORAN, KAYLA

Provider ID: 296585

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

SPEECH PATHOLOGIST


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): Fax: (888) 539-8781

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273363

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: 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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 Website: N/A
IPA: UCSD Medical Group


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

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


SURGERY CRITICAL CARE

ADAMS, LAURA

Provider ID: 284407

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: 1144616541

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

POTENZA, BRUCE

Provider ID: 277298
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
📞 Phone: (619) 543-7200
🕒 After Hours Phone: (619) 543-7200
Provider Gender: Male
NPI: 1548281496
🗣️ 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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

VENTRO, GEORGE

Provider ID: 284418
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: 1548604648
🗣️ 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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

SURGERY CRITICAL CARE

WEAVER, JESSICA

Provider ID: 243239
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: 1396044657
🗣️ 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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group



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\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group


SURGERY GENERAL

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\None

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-4:30PM
 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 9AM-4:30PM
 Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 9AM-5PM
F 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):  Accessibility: CONTACT
PROVIDER

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 9AM-5PM
F 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

BRODERICK, RYAN

Provider ID: 286342

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D. دليل مقدمي الخدمات المتخصصين

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: 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network

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

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health
Network

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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201729

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286356

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: 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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5PM
F 8:30AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

SURGERY GENERAL

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5PM
F 8:30AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-5PM
F 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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CHULA VISTA, Sharp
Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY HAND ORTHOPEDIC


STEPHENSON, SAMUEL

Provider ID: 284934

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: 1578058665

 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942469663

 Provider English Spoken: Y

 Provider Language(s)

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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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-4:30PM

Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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
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\None

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Imperial Health Holdings
Medical Group-SD


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

SURGERY ORTHOPEDIC

BUI, CHRISTOPHER

Provider ID: 241162

Board Certified Specialty: No





 200 W ARBOR DR
SAN DIEGO, CA 92103



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D. دليل مقدمي الخدمات المتخصصين





 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\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N





 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: UCSD Medical Group

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
IPA: Rady Childrens Health
Network

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


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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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


IPA: Rady Childrens Health Network

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

IPA: Rady Childrens Health Network

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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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
Cultural Competency: N

Hospital Affiliation: UCSD LA

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D. دليل مقدمي الخدمات المتخصصين


JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303797

Board Certified Specialty: No

 3030 CHILDRENS WAY FL

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
Website: N/A
IPA: Rady Childrens Health Network

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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
Min/Max Age: 0\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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

IPA: Rady Childrens Health
Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health
Network

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

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

KELLER, BENJAMIN

Provider ID: 285941
 Board Certified Specialty: No
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-7711
 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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health

Network

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network

SURGERY PEDIATRIC

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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


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D. دليل مقدمي الخدمات المتخصصين

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health Network

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 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health Network




SURGERY PLASTIC

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 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health Network, UCSD Medical Group






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\None
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Rady Childrens Health Network, UCSD Medical Group

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

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D. دليل مقدمي الخدمات المتخصصين

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group


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\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group


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

 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 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

SURGERY PLASTIC

LEWIS, PRIYA

Provider ID: 302132

Board Certified Specialty: No

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

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

IPA: Rady Childrens Health

Network, UCSD Medical Group

SURGERY THORACIC

FOX, KENNETH

Provider ID: 257841

Board Certified Specialty: No

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network, UCSD Medical Group

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

After Hours Phone: (858)
966-8030

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 8AM-5PM

Website: N/A

IPA: Rady Childrens Health
Network

SURGERY THORACIC

NIGRO, JOHN

Provider ID: 205367

Board Certified Specialty: No

3030 CHILDRENS WAY STE
202

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D. دليل مقدمي الخدمات المتخصصين

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
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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 8AM-5PM
🌐 Website: N/A
IPA: Rady Childrens Health Network

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\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

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

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

UROLOGY

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
UCSD Medical Group

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: Community Care IPA LLC,
UCSD Medical Group

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

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American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

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\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

UROLOGY


UNTERBERG, STEPHEN

Provider ID: 295833

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: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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

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Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE


PRACTITIONER

BLAND, JACELIS

Provider ID: 296766

Board Certified Specialty: No

 150 VALPREDA 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM
SA 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE


PRACTITIONER

FREEMAN, WANDA

Provider ID: 305751

Board Certified Specialty: No

 150 VALPREDA 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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE


PRACTITIONER

GARCIA, REGINA

Provider ID: 297837

Board Certified Specialty: No

 150 VALPREDA 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER









اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP








CERTIFIED NURSE PRACTITIONER

HAN, ANGELA

Provider ID: 300215
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: 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP





CERTIFIED NURSE PRACTITIONER




KOHOUT, KATHRYN

Provider ID: 291105
Board Certified Specialty: No
 150 VALPRED A 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-8PM
SA 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC

CERTIFIED NURSE PRACTITIONER

PARSONS, MEKRAE

Provider ID: 303220

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

PRIETO, ALEJANDRA

Provider ID: 297888

Board Certified Specialty: No

150 VALPREDA 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 290739

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: 1407287469

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

CHIROPRACTOR

HINES, TAYTE

Provider ID: 302080

Board Certified Specialty: No

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERNAL MEDICINE

TOLENTINO, ARTURO

Provider ID: 298696

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: 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 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

INTERVENTIONAL

CARDIOLOGY

DO, HULBERT

Provider ID: 291583

Board Certified Specialty: No

150 VALPREDA 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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): N
IPA: IHP of Southern Cal-PHP

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-8PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 291607

Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1811307051

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D. دليل مقدمي الخدمات المتخصصين

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-4:30PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-6PM

Website: N/A

IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

CABRERA, MICHELLE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Provider ID: 303025
Board Certified Specialty: No
150 VALPRED 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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

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 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, Rady Childrens Health Network

OPHTHALMOLOGY

GUAN, HOWARD
Provider ID: 303144
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: 0\0
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

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\None


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D. دليل مقدمي الخدمات المتخصصين

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

PEDIATRICS


LUM HO, RACHEL

Provider ID: 304047

Board Certified Specialty: No

 150 VALPREDA 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\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

PEDIATRICS


LUM HO, RACHEL

Provider ID: 303150

Board Certified Specialty: No

 150 VALPREDA 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network


PEDIATRICS

POSADAS, EMERITO

Provider ID: 257536

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: 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): Provider ID: 302439

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM

 Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT


PEDIATRICS

QUINTERO, CAROLYN

Provider ID: 303142

Board Certified Specialty: No

 150 VALPREDA 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 8AM-6PM
SA 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

CELESTINO, MISHEL

Board Certified Specialty: No

 150 VALPREDA 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\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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




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D. دليل مقدمي الخدمات المتخصصين




Medi-Cal Open Panel: Yes
Min/Max Age: 2\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM

Provider ID: 298336
Board Certified Specialty: No
 150 VALPREDA RD
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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

MATHIAS, WILLIAM




Provider ID: 302570
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: Male
NPI: 1285806323

 Provider English Spoken: Y
Cultural Competency: N



Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A

IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

POLLEY, SHANNON


Provider ID: 296093
Board Certified Specialty: No
 150 VALPREDA 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\None
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM
SA 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP



PSYCHOLOGIST

ALTAMIRANO, LEON


Provider ID: 290362
Board Certified Specialty: No

 150 VALPREDA 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\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

ARIELLA, LYNDIA

Provider ID: 299716
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Fax: (760) 736-8740

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

GEORGIEV, MARY JO

Provider ID: 290793

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 737-6767

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

SIMPSON, ERIC

Provider ID: 290803
Board Certified Specialty: No
150 VALPREDA 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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

PSYCHOLOGIST

TORRES, HECTOR

Provider ID: 290788
Board Certified Specialty: No
150 VALPREDA 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\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N






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 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8AM-5PM
 **Website:** N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
 **Website:** N/A
IPA: IHP of Southern Cal-PHP



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\None
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
 **Website:** N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL): N
 **Accessibility:** CONTACT PROVIDER
 **Hours:** M-F 8AM-8PM SA 8AM-2PM
 **Website:** N/A
IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP





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






اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



D. دليل مقدمي الخدمات المتخصصين

 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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
IPA: IHP of Southern Cal-PHP

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8:30AM-5PM
 Website: N/A
IPA: IHP of Southern Cal-PHP









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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-8PM
SA 8AM-2PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

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\None
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-8PM
SA 8AM-2PM
 Website: N/A
IPA: IHP of Southern Cal-PHP,
UCSD Medical Group

INTERNAL MEDICINE

SY, RAMON

Provider ID: 297757
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:30PM
SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-2PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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 10AM-4PM

M-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM

M 8:30AM-8PM





























W-F 8:30AM-5:30PM

SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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<p align="center"><u>PEDIATRICS</u></p> <p>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 IPA: IHP of Southern Cal-PHP</p>	<p align="center">662-4100</p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p align="center">N</p> <p> Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP</p>
<p align="center"><u>PSYCHOLOGIST</u></p> <p>IBANEZ, BERENICE Provider ID: 290465 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</p>	<p align="center"><u>PSYCHOLOGIST</u></p> <p>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):</p>	<p align="center"><u>REGISTERED PHYSICAL THERAPIST</u></p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: IHP of Southern Cal-PHP</p>
		<p align="center"><u>SPEECH PATHOLOGIST</u></p> <p>HILL, CARLA Provider ID: 295894 Board Certified Specialty: No  3364 BEYER BLVD STE 102-103 SAN YSIDRO, CA 92173</p>

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): **VENKATESH, VIJAY**

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 10AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN

Provider ID: 243961

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: 1831144005

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7AM-5PM

Website: N/A

IPA: Community Care IPA LLC

RADIOLOGY DIAGNOSTIC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

REGISTERED PHYSICAL

THERAPIST

BOUTELLE, 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)

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591-7750
 Provider Gender: Male
 NPI: 1063461101
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M 7AM-7PM
 TU 7AM-5PM
 W 7AM-7PM
 TH 7AM-5PM
 F 7AM-7PM
 Website: N/A
 IPA: Community Care IPA LLC

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: TU-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network


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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP


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

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 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


CARDIOVASCULAR DISEASE

DO, HULBERT

Provider ID: 290574

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: 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\None

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

 Hours: SU 9AM-8PM

M-TH 9AM-8PM

F 9AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED ACUPUNCTURIST

SONG, CAROL

Provider ID: 290550

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 10:30AM-7:30PM

W-F 8AM-5PM

Website: N/A

IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

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 9AM-5PM
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


CERTIFIED NURSE

PRACTITIONER


CHRISTY, TYLER

Provider ID: 303927

 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\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

PRACTITIONER


CHRISTY, TYLER

Provider ID: 303929

Board Certified Specialty: No
N

 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\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM

TU 10:30AM-7:30PM

W-F 8AM-5PM

SA 9AM-4PM

 Website: N/A

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D. دليل مقدمي الخدمات المتخصصين

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-7PM
F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HARRIS, PAMELA

Provider ID: 302286

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-7PM
F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

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D. دليل مقدمي الخدمات المتخصصين

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301

Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP,
Rady Childrens Health

Network

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET
Provider ID: 298083
Board Certified Specialty: No

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D. دليل مقدمي الخدمات المتخصصين

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: UCSD Medical Group

CERTIFIED NURSE PRACTITIONER

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\None
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP































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\None
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8AM-5PM
W 10AM-7PM
TH-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: IHP of Southern Cal-PHP

CERTIFIED NURSE

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D. دليل مقدمي الخدمات المتخصصين

<p>PRACTITIONER</p> <p>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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M 8AM-5PM TU-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM  Website: N/A IPA: Community Care IPA LLC</p>	<p> 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\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM SA 9AM-4PM  Website: N/A IPA: Community Care IPA LLC</p>	<p>N  Accessibility: CONTACT PROVIDER  Hours: TU-W 0PM-8PM  Website: N/A IPA: IHP of Southern Cal-PHP</p>
<p>CERTIFIED NURSE PRACTITIONER</p> <p>PRITZKER, JOELY Provider ID: 239773 Board Certified Specialty: No  1000 VALE TERRACE DR VISTA, CA 92084  Phone: (760) 631-5000 Fax: (760) 414-3892</p>	<p>CERTIFIED NURSE PRACTITIONER</p> <p>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):</p>	<p>CERTIFIED NURSE PRACTITIONER</p> <p>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 JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>

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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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-2PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-2PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-2PM
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,
Rady Childrens Health
Network

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

Provider Gender: Female

NPI: 1679926208

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM
SA 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

CERTIFIED NURSE PRACTITIONER

YCASAS, EMILY

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D. دليل مقدمي الخدمات المتخصصين

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM

Website: N/A

IPA: IHP of Southern Cal-PHP

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 300224

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: 12\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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)

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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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT

PROVIDER
 Hours: M-TH 8AM-8PM
 F 9AM-5PM
 SA 9AM-4PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

FAMILY PRACTICE

HIKES, RYAN
 Provider ID: 291652
 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: 1609862358
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M 8AM-5PM
 TU 10AM-7PM
 W-F 8AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين


Min/Max Age: 0\None

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 10AM-7PM
W-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


FAMILY PRACTICE

VIDAL, MONICA


Provider ID: 293354

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

 Website: N/A

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IPA: IHP of Southern Cal-PHP

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ

Provider ID: 282163

Board Certified Specialty: No

910 SYCAMORE AVE STE 102

VISTA, CA 92081

Phone: (760) 536-7737

Fax: (760) 536-7959

After Hours Phone: (760) 536-7737

Provider Gender: Male

NPI: 1144486929

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, EARL AND
LORRAINE MILLER

CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,

Providence St Joseph Hospital,
Providence St Jude Medical

Center, ORANGE COAST MEM
MED CTR, FOUNTAIN VALLEY

REGIONAL HOSP AND MED

CTR, FOUNTAIN VALLEY

REGIONAL HOSP AND MED

CTR, CORONA REGIONAL

MED CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE

MEDICINE

RUBENZIK, 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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

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,

SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, EL CENTRO

REGIONAL MEDICAL CENTER,
PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8AM-8PM
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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

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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM

F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 9AM-8PM
F 9AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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

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D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8PM

F 9AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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 APH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-8PM

F 9AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM

TU 9:30AM-5PM

W 8AM-5PM

TH 10AM-7PM

F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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

MEDICAL CENTER-FRESNO,

CALIFORNIA PACIFIC

MEDICAL CENTER - D P APH

Medi-Cal Open Panel: Yes

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8AM-5PM
TU 9:30AM-5PM
W 8AM-5PM
TH 10AM-7PM
F 8AM-5PM
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8AM-5PM
TH 10:30AM-7:30PM
F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8AM-5PM
TH 10:30AM-7:30PM
F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8AM-5PM
M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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

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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP


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\None





American Sign Language (ASL):




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D. دليل مقدمي الخدمات المتخصصين

N
 Accessibility: CONTACT PROVIDER
 Hours: SU 9AM-4PM
 M-TH 8AM-8PM
 F 8AM-5PM
 SA 9AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER
 Hours: SU 9AM-4PM
 M-TH 8AM-8PM
 F 8AM-5PM
 SA 9AM-4PM
 Website: N/A

IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 9AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP





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
 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 8AM-5PM
 SA 9AM-4PM
 Website: N/A
 IPA: Community Care IPA LLC,
 IHP of Southern Cal-PHP

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\None
 American Sign Language (ASL):

N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER
Hours: M-F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC,
IHP of Southern Cal-PHP

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 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: BLUE SHIELD PROMISE
HEALTH PLAN DIRECT

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\None
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M 8AM-5PM
TU-TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM
Website: N/A
IPA: Community Care IPA LLC

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

ENCINITAS, TRI CITY MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 8AM-8PM
F 8AM-5PM

SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 7AM-7PM

TU 7AM-5PM

W 7AM-7PM

TH 7AM-5PM

F 7AM-7PM

 Website: N/A

IPA: Community Care IPA LLC

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

D. دليل مقدمي الخدمات المتخصصين

☎ 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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

SURGERY GENERAL

GROVE, JAY

Provider ID: 245227

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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


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D. دليل مقدمي الخدمات المتخصصين

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


ANESTHESIOLOGY CRITICAL CARE MEDICINE

RODRIGUEZ-MINETTE, JESSICA


Provider ID: 275308

Board Certified Specialty: No

 36485 INLAND VALLEY DR WILDOMAR, CA 92595

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female


NPI: 1164809950


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE CRITICAL CARE MEDICINE

CHEN, KENNETH

Provider ID: 283131

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: 1720472657

 Provider English Spoken: Y


 Provider Language(s) Spoken: Mandarin


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


INTERNAL MEDICINE CRITICAL CARE MEDICINE

PATEL, SAGAR

Provider ID: 283000

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: 1245672302

 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\None

American Sign Language (ASL):


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D. دليل مقدمي الخدمات المتخصصين

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

INTERNAL MEDICINE


CRITICAL CARE MEDICINE


TRAN, LINH

Provider ID: 202658

Board Certified Specialty: Yes

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

 After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SOUTHWEST


HEALTHCARE RANCHO
SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PULMONARY DISEASES


KUMAR, AVNEE


Provider ID: 300013

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: Female

NPI: 1750745394

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


SURGERY CRITICAL CARE


WEAVER, JESSICA

Provider ID: 248112

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: 1396044657

 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\None

American Sign Language (ASL):


N

 Accessibility: CONTACT

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D. دليل مقدمي الخدمات المتخصصين

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

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\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: M-F 8AM-4:30PM

NPI: 1265468946

Website: www.alvaradohospital.com

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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\None

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

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\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7
days/week

NPI: 1992880512

Website: N/A

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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\None

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

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\None

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO


Hours: 24 Hours / 7
days/week

License Number: 080000083

NPI: 1457321317

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

 Website: www.palomarhealth.org/facilities/palomar-medical-center


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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\None

 Site English Spoken: Y
Cultural Competency: N


Hospital Accreditation Status: JCAHO

 Hours: 24 Hours / 7 days/week

NPI: 1356410351

 Website: www.paradisevallyhospital.net


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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\None

 Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

 Hours: 24 Hours / 7 days/week

NPI: 1710065933

 Website: www.rchsd.org


American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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\None


 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\None


 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

Birth Friendly: Y

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305

 354 SANTA FE DR
ENCINITAS, CA 92024

 Phone: (760) 753-6501

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

📞 After Hours Phone: (760) 753-6501

Accepting New Patients: No
Min/Max Age: 0\None

🗣️ Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

🕒 Hours: 24 Hours / 7 days/week

License Number: 080000148
NPI: 1700829199

🌐 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital-san-diego

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

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\None

🗣️ Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1659359446

🌐 Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital-san-diego

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

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\None

🗣️ 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

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\None

🗣️ 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

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\None

🗣️ Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

🕒 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

Birthing Friendly: Y

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\None

📄 Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1154304475

🌐 Website: www.sharp.com/hospitals/coronado/

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

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\None

📄 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\None

📄 Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1407839921

🌐 Website: www.sharp.com/hospitals/memorial/

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

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\None

📄 Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1801861190

🌐 Website: www.tricitymed.org

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y








UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053

📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037

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E. دليل المستشفيات - مستشفى الرعاية العامة الحادة

 Phone: (858) 657-7000 [crest.aspx](#)
 After Hours Phone: (858) 657-7000 American Sign Language (ASL):
N
Accepting New Patients: No
Min/Max Age: 0\None
 Accessibility: CONTACT
PROVIDER
 Site English Spoken: Y
Cultural Competency: N
Birthing Friendly: Y
Hospital Accreditation Status:
JCAHO
 Hours: 24 Hours / 7
days/week
License Number: 090000101
NPI: 1497021265
 Website: N/A
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

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\None
 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/hill>

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

CARLSBAD

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):
N

Accessibility: CONTACT
PROVIDER

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 9AM-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.avacadopostacute.com

Credentials and/or
certifications:







Site English Spoken: Y
Cultural Competency: N

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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
 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.c







om
 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

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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

SAN DIEGO POST ACUTE CENTER

Provider ID: 173508

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:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

SOMERSET SUBACUTE AND CARE

Provider ID: 348526

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://somensetsubacute.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

THE BRADLEY COURT

Provider ID: 419158

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:

Site English Spoken: Y

Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

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:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VILLA LAS PALMAS HEALTHCARE CTR

Provider ID: 172020

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:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

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 8AM-5PM

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 7AM-4PM
NPI: 1659482032

Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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 8AM-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://lifecarecenterofescondido.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

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://palomarheightsrehab.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 8AM-5PM

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

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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 8AM-5PM

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 8AM-5PM

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-4PM

NPI: 1588067482

Website: <http://thecoveatlajolla.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/arborhills/

Credentials and/or

certifications:

Site English Spoken: Y




























Site Languages(s) Spoken:
Tagalog, Spanish, Russian

Cultural Competency: N

American Sign Language (ASL):

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p>	<p> <i>Site English Spoken: Y</i> <i>Cultural Competency: N</i> <i>American Sign Language (ASL): N</i></p>	<p>460-4444 <i>Accepting New Patients: No</i> <i>NPI: 1689077588</i></p>
<p>CARE MERIDIAN LA MESA <i>Provider ID: 173379</i>  5640 AZTEC DR LA MESA, CA 91942  <i>Phone: (949) 263-6632</i> <i>Fax: (619) 465-0019</i>  <i>After Hours Phone: (949) 263-6632</i> <i>Accepting New Patients: No</i> <i>NPI: 1235404674</i>  <i>Website: www.neurorestorative.com</i> <i>Credentials and/or certifications:</i></p>	<p>GROSSMONT HOSPITAL DP SNF <i>Provider ID: 172643</i>  5555 GROSSMONT CENTER DR LA MESA, CA 91942  <i>Phone: (619) 740-4110</i>  <i>After Hours Phone: (619) 740-4110</i> <i>Accepting New Patients: No</i> <i>NPI: 1417930249</i>  <i>Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm</i> <i>Credentials and/or certifications:</i></p>	<p> <i>Website: http://grossmontpostacute.com</i> <i>Credentials and/or certifications:</i>  <i>Site English Spoken: Y</i> <i>Cultural Competency: N</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p>
<p>COUNTRY MANOR LA MESA HEALTHCARE CENTER <i>Provider ID: 172023</i>  5696 LAKE MURRAY BLVD LA MESA, CA 91942  <i>Phone: (619) 460-7871</i>  <i>After Hours Phone: (619) 460-7871</i> <i>Accepting New Patients: No</i> <i>NPI: 1457345001</i>  <i>Website: N/A</i> <i>Credentials and/or certifications:</i></p>	<p>GROSSMONT POST ACUTE CARE <i>Provider ID: 310488</i>  8787 CENTER DR LA MESA, CA 91942  <i>Phone: (619) 460-4444</i> <i>Fax: (619) 713-5116</i>  <i>After Hours Phone: (619)</i></p>	<p>HILLDALE HABILITATION CENTER <i>Provider ID: 527671</i>  7979 LA MESA BLVD LA MESA, CA 91942  <i>Phone: (619) 465-8010</i> <i>Fax: (619) 465-8348</i>  <i>After Hours Phone: (619) 465-8010</i> <i>Accepting New Patients: No</i>  <i>Hours: M-F 8AM-5PM</i> <i>NPI: 1073736427</i>  <i>Website: N/A</i> <i>Credentials and/or certifications:</i>  <i>Site English Spoken: Y</i> <i>Cultural Competency: N</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <p>LA MESA HEALTHCARE CTR</p>

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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 9AM-5PM
F 5AM-5PM

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

Website: <http://lemongrovecare.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

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

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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)
791-7700

Accepting New Patients: No

Hours: M-F 9AM-5PM

NPI: 1235133687

Website: www.lifegen.net/friendshipmanor/
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

Fax: (619) 474-1925

After Hours Phone: (619)
474-6741

Accepting New Patients: No
NPI: 1730176538

Website: www.windsorcare.com
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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 Language(s) Spoken:
Spanish, Armenian, Korean,
Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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 8AM-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](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 8AM-5PM

NPI: 1083039861

Website: N/A

Credentials and/or
certifications:

Site English Spoken: Y
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

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

Phone: (619) 283-5855

Fax: (619) 284-6327

After Hours Phone: (619) 283-5855

Accepting New Patients: No

Hours: SU-SA 9AM-5PM
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

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

PROVIDER

HILLCREST HEIGHTS 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 8AM-5PM

NPI: 1558825067

Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): Accepting New Patients: No
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): Accepting New Patients: No
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): Accepting New Patients: No
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): Accepting New Patients: No
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): Accepting New Patients: No
N

Accessibility: CONTACT

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

<p>PROVIDER</p> <p>ST PAULS HEALTH CARE CENTER</p> <p>Provider ID: 288531</p> <p>235 NUTMEG ST SAN DIEGO, CA 92103</p> <p>Phone: (619) 677-3895</p> <p>After Hours Phone: (619) 677-3895</p> <p>Accepting New Patients: No</p> <p>NPI: 1972619104</p> <p>Website: N/A</p> <p>Credentials and/or certifications: CMS</p> <p>Site English Spoken: Y</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p>	<p>N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>THE SPRINGS AT PACIFIC REGENT</p> <p>Provider ID: 172008</p> <p>3884 NOBEL DR SAN DIEGO, CA 92122</p> <p>Phone: (858) 625-8700</p> <p>Fax: (858) 625-8777</p> <p>After Hours Phone: (858) 625-8700</p> <p>Accepting New Patients: No</p> <p>NPI: 1003198342</p> <p>Website: N/A</p> <p>Credentials and/or certifications:</p> <p>Site English Spoken: Y</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p>	<p>certifications:</p> <p>Site English Spoken: Y</p> <p>Site Languages(s) Spoken: Tagalog, Mandarin, Russian, Vietnamese, Farsi, Spanish</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p>
<p>THE PAVILION AT OCEAN POINT</p> <p>Provider ID: 262151</p> <p>3202 DUKE ST SAN DIEGO, CA 92110</p> <p>Phone: (619) 224-4141</p> <p>After Hours Phone: (619) 224-4141</p> <p>Accepting New Patients: No</p> <p>NPI: 1538174990</p> <p>Website: N/A</p> <p>Credentials and/or certifications:</p> <p>Site English Spoken: Y</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL):</p>	<p>UNIVERSITY CARE CENTER</p> <p>Provider ID: 172024</p> <p>5602 UNIVERSITY AVE SAN DIEGO, CA 92105</p> <p>Phone: (619) 583-1993</p> <p>Fax: (619) 501-3559</p> <p>After Hours Phone: (619) 583-1993</p> <p>Accepting New Patients: No</p> <p>NPI: 1871522672</p> <p>Website: http://universitycarecenter.com</p> <p>Credentials and/or</p>	<p>VILLA RANCHO BERNARDO CARE CENTER</p> <p>Provider ID: 172009</p> <p>15720 BERNARDO CENTER DR SAN DIEGO, CA 92127</p> <p>Phone: (858) 672-3900</p> <p>Fax: (858) 672-9247</p> <p>After Hours Phone: (858) 672-3900</p> <p>Accepting New Patients: No</p> <p>NPI: 1518063437</p> <p>Website: www.villaranchobernardo.com</p> <p>Credentials and/or certifications:</p> <p>Site English Spoken: Y</p> <p>Cultural Competency: N</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL</p> <p>Provider ID: 172012</p>

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F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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://windsorgoIdenhill.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
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 8AM-5PM
NPI: 1184628554

Website: www.lifegen.net/Sstanfordcourt/
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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

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 8AM-5PM
NPI: 1649375403

Website: covivingmountmiguel.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 8AM-5PM
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

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

F. الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

☎ After Hours Phone: (760) 945-3033

Accepting New Patients: No

🕒 Hours: SU-SA 8:30AM-5PM

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 9AM-5PM

NPI: 1811942063

🌐 Website: www.lcca.com
Credentials and/or

certifications:

📄 Site English Spoken: Y

📄 Site Languages(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) 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

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.F الرعاية طويلة الأجل (LTC) ومرافق التمريض المتخصص (SNF)

Cultural Competency: N

American Sign Language (ASL): N

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 8AM-5PM

NPI: 1912189812

🌐 Website: <http://astorhealth.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

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

🕒 After Hours Phone: (760) 630-2273

Accepting New Patients: No

🕒 Hours: SU-SA 8:30AM-5PM

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

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

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 7AM-3PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):

N

Language line interpreter
services: N

If Facility has completed
cultural competence training:

N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://openarmsadhc.com>

Fax: (619) 444-1516

After Hours Phone: (619)
444-1522

Accepting New Patients: No

Hours: M-F 8AM-4PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):

N

Language line interpreter
services: N

If Facility has completed
cultural competence training:

N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://magnoliaadhc.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 8AM-3:30PM

NPI: 1821125550

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):

N

Language line interpreter
services: N

If Facility has completed
cultural competence training:

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>

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 9AM-3PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):

N
Language line interpreter
services: N

If Facility has completed
cultural competence training:

N

Facility has access to skilled
medical interpreters on site?: N

EL CAJON

MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 444-1522

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

Interpreter Non-English

Languages: N

Website: N/A

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

American Sign Language (ASL):
N

Language line interpreter
services: N

If Facility has completed
cultural competence training:
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

If Facility has completed
cultural competence training:
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

Provider ID: 404183

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

If Facility has completed
cultural competence training:
N

Facility has access to skilled
medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: N/A

SAN DIEGO

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-4PM
NPI: 1346455961

Accessibility: CONTACT
PROVIDER

American Sign Language (ASL):
N

Language line interpreter
services: N

If Facility has completed
cultural competence training:
N

N

Facility has access to skilled

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G. خدمات البالغين المجتمعية (CBAS) - خدمات نهائية للكبار

medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: www.lovingcareadhcc.com

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
If Facility has completed cultural competence training: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: www.casa-pacificadhcc.com

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 Language(s) Spoken: Vietnamese, Mandarin, Spanish
Hours: M-F 8AM-5PM
License Number: 550005837
NPI: 1396201828
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: Y
If Facility has completed cultural competence training: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: Y
Website: Sandiegofamilycircle.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
Language line interpreter services: N
If Facility has completed cultural competence training: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English
Languages: N
Website: www.americareadhc.com

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H. خدمات الدعم المنزلي في المقاطعة (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/sd/c/hhsa/programs/ais/inhome_supportive_services.html

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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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

CAMPO

CASTLEBERRY, DANI

Provider Gender: Female
License Number: LCS95022
NPI: 1053706853

Provider English Spoken: Y
 Spanish

Cultural Competency: N

DANI E CASTLEBERRY

1388 BUCKMAN SPRINGS
RD
CAMPO, CA 91906

Phone: (619) 662-4100
Fax: (619) 478-9164

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-4PM

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\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

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١. دليل الصحة النفسية

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-8PM
SA 8AM-4PM*

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\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM*

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


TDD: U

Min/Max Age: 0\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-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\None

*Gender Restriction: No Gender
restriction*

*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\None

*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-8PM
SA 8AM-4PM*

MALAK, LAWRENCE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 Gender Restriction: No Gender restriction
 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10AM-4PM
 M-F 8:30AM-5:30PM
 SA 8AM-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
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10AM-4PM
 M-TU 8:30AM-8PM
 W-F 8:30AM-5:30PM
 SA 8AM-2PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

TROYER, EMILY
 Provider Gender: Female
 License Number: A149101

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-8PM
SA 8AM-4PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

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

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

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

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ا. دليل الصحة النفسية

 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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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

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TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM




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
 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\None
 Gender Restriction: No Gender restriction
 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

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 *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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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 Languages(s) Spoken: Spanish*


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*


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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

LOPEZ, JOANNA

*Provider Gender: Female
License Number: MFC50381*

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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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 7AM-7:30PM
TU 7AM-4:30PM
W 7AM-7:30PM
TH-F 7AM-4:30PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 Gender Restriction: No Gender
 restriction
 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
 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\None
 Gender Restriction: No Gender
 restriction
 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
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

CASTILLO, TIFFANY

Provider Gender: Female
 License Number: A158480
 NPI: 1114459252
 Provider English Spoken: Y
 Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5PM

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\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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) 520-8100
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
 TDD: U

Min/Max Age: 14\None
 Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-OPM

FU, KATHERINE

Provider Gender: Female
 License Number: A187562
 NPI: 1356877807
 Provider English Spoken: Y
 Cultural Competency: N
KATHERINE FU
 704 E GRAND AVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ا. دليل الصحة النفسية

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

MAGOS, DANIEL

Provider Gender: Male

License Number: LCS88270

NPI: 1578983664

🗃 Provider English Spoken: Y
Cultural Competency: N

DANIEL K MAGOS


📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

🕒 After Hours Phone: (760)

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520-8300
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U


Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

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

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

RIOS, SIERRA

Provider Gender: Female

License Number: LCS91970

NPI: 1942746128

Provider English Spoken: Y

Spanish

Cultural Competency: N

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 7AM-7:30PM

TU 7AM-4:30PM

W 7AM-7:30PM

TH-F 7AM-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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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

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Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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 Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

SUOZZO, JOSEPH

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT

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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 Language(s) Spoken:
Spanish, German, French,
Cappadocian Greek, Hindi


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM



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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM



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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM



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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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 Languages(s) Spoken: German, Spanish


TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM


WOODWORTH, JENNIFER

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N






 Accessibility: CONTACT PROVIDER

FALLBROOK

CARDOZA, CLAUDIA



Provider Gender: Female
License Number: LCS82778
NPI: 1871084715

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 *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 Languages(s) Spoken: Spanish*
TDD: U
Min/Max Age: 6\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*


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\None
Gender Restriction: No Gender restriction
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\None
Gender Restriction: No Gender restriction
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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

MILES, RENEE

Provider Gender: Female
License Number: LCS70204
NPI: 1053763623
 *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)*

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451-4720

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Gender Restriction: No Gender restriction

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

📍 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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162

☑ Provider English Spoken: Y
Cultural Competency: N

CHRISTOPHER R BOOTH

📍 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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

BOUTELLE, KERRI

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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

🕒 After Hours Phone: (800)

926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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

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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\None
Gender Restriction: No Gender restriction
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

📍 8950 VILLA LA JOLLA DR
STE C101

☎ 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\None
Gender Restriction: No Gender

restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
⌚ Hours: M-F 8AM-5PM

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\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
⌚ Hours: M-F 8AM-5PM

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\None
Gender Restriction: No Gender restriction
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

☎ 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

ELLEGE, LINDSAY

Provider Gender: Female

License Number: LCS96136


NPI: 1619428828

 Provider English Spoken: Y
Cultural Competency: N

LINDSAY E ELLEGE

 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\None

Gender Restriction: No Gender restriction

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
Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

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\None


Gender Restriction: No Gender restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

١. دليل الصحة النفسية

American Sign Language (ASL):  Arabic
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

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

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

LEE, DAVID

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ا. دليل الصحة النفسية

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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

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\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

MAGINOT-CHESTER, TAMARA

Provider Gender: Female
License Number: PSY28678
NPI: 1043441165
☐ Provider English Spoken: Y
Cultural Competency: N
TAMARA R MAGINOT
CHESTER

📍 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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 8AM-5PM

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☐ *Provider English Spoken: Y*
 ☐ *Spanish*
Cultural Competency: N
STEPHANIE MARTINEZ
 📍 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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 ♿ *Accessibility: CONTACT*
PROVIDER
 🕒 *Hours: M-F 8AM-5PM*

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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 ♿ *Accessibility: CONTACT*
PROVIDER
 🕒 *Hours: M-F 9AM-5PM*

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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 ♿ *Accessibility: CONTACT*
PROVIDER

🕒 *Hours: M-F 8AM-5PM*

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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 ♿ *Accessibility: CONTACT*
PROVIDER
 🕒 *Hours: M-F 8AM-5PM*

MOORE, SHAVON

Provider Gender: Female
License Number: A152789
NPI: 1053682773
 ☐ *Provider English Spoken: Y*
Cultural Competency: N
SHAVON C MOORE
 📍 9300 CAMPUS POINT DR

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620


Provider English Spoken: Y


Vietnamese

Cultural Competency: N

HOANG A NGUYEN

 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\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

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☎ *After Hours Phone: (858) 822-5881*

🌐 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT PROVIDER*

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934

NPI: 1679869556

🗒 *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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

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\None

Gender Restriction: No Gender restriction

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American Sign Language (ASL): Cultural Competency: N
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155


NPI: 1659920403

 *Provider English Spoken: Y*


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\None

Gender Restriction: No Gender restriction

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

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

ZLATAR, ZVINKA

Provider Gender: Female

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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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-5PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-6PM

KUGEL, SAMUEL

Provider Gender: Male
 License Number: A54412
 NPI: 1497813968
 Provider English Spoken: Y
 Portuguese, Spanish
 Cultural Competency: N
 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 9AM-5PM

SACHS, MELISSA

Provider Gender: Female
 License Number: LCS76968

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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\None
 Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:30AM-5:30PM
 SA 8AM-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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

OCEANSIDE

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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-TU 8AM-5PM
 W 8AM-7PM
 TH-F 8AM-5PM
 SA 9AM-4PM

ACOSTA, AZUCENA

Provider Gender: Female
 License Number: LCS98304

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١. دليل الصحة النفسية

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

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

📍 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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-7PM

F 8AM-5PM

SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-7PM
F 8AM-5PM

SA 9AM-4PM

CHRISTIANSON, WARREN


Provider Gender: Male

License Number: 20A9664

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ا. دليل الصحة النفسية


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

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM

F 8AM-5PM


SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM

F 8AM-5PM


SA 9AM-4PM

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\None


Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM

F 8AM-5PM

SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM

F 8AM-5PM

SA 9AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 9AM-6:15PM
W 9AM-6PM

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\None

Gender Restriction: No Gender restriction

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

📍 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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-7PM
F 9AM-5PM
SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 9AM-7PM
F 9AM-5PM
SA 9AM-4PM


CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.






 *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\None
Gender Restriction: No Gender
restriction


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\None
Gender Restriction: No Gender
restriction
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
 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\None
Gender Restriction: No Gender
restriction

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\None
Gender Restriction: No Gender
restriction

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-5PM

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

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

MONTEZ, REBECCA

Provider Gender: Female

License Number: LCS26869

NPI: 1396047809

Provider English Spoken: Y

Spanish

Cultural Competency: N

REBECCA MONTEZ

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
Gender Restriction: No Gender restriction
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\None
Gender Restriction: No Gender

restriction
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\None
Gender Restriction: No Gender restriction
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\None
Gender Restriction: No Gender restriction
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\None

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Gender Restriction: No Gender restriction

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

📍 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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM

TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM

TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM

TU 10AM-7PM

W-F 8AM-5PM

SA 9AM-4PM

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

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


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-4PM

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\None
 Gender Restriction: No Gender restriction
 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
 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\None
 Gender Restriction: No Gender restriction
 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\None
 Gender Restriction: No Gender restriction
 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 9AM-5PM








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\None
 Gender Restriction: No Gender
 restriction
 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
 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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female
 License Number: PSY9962
 NPI: 1710902143
 Provider English Spoken: Y
 German, Spanish
 Cultural Competency: N
 ANDREA VALLEZ-BARLAM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9AM-5PM

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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-4PM

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\None
Gender Restriction: No Gender restriction
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\None
Gender Restriction: No Gender restriction
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
7011 LINDA VISTA RD
SAN DIEGO, CA 92111

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 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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None


Gender Restriction: No Gender restriction


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١. دليل الصحة النفسية

American Sign Language (ASL): SIMERJEET K BRAR

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

BASS, GURGIANA

Provider Gender: Male

License Number: PSY24750


NPI: 1639325277

 Provider English Spoken: Y


Cultural Competency: N

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL): AMANDA A BREEDLOVE

N

 Accessibility: CONTACT
PROVIDER

BRAR, SIMERJEET


Provider Gender: Female


License Number: A144765

NPI: 1417393307

 Provider English Spoken: Y


Cultural Competency: N

 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

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F 8AM-5PM

BREEDLOVE, AMANDA

Provider Gender: Female

License Number: MFC139230

NPI: 1316487119


 Provider English Spoken: Y

Cultural Competency: N


American Sign Language (ASL): 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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

**CEBALLOS, JACQUELINE
CAMILLE**

Provider Gender: Female
License Number: LCS110194
NPI: 1093350258

☐ 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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

**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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CIOBANU, COSMINA

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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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CIOBANU, COSMINA

Provider Gender: Female

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

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

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

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

CLEMENT, LUIS

Provider Gender: Male

License Number: PSY28534

NPI: 1235364712

☑ Provider English Spoken: Y
Cultural Competency: N

LUIS F CLEMENT

📍 2630 1ST AVE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

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\None
 Gender Restriction: No Gender restriction
 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\None

Gender Restriction: No Gender restriction
 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\None
 Gender Restriction: No Gender restriction
 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 9AM-4PM

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\None
 Gender Restriction: No Gender restriction
 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 9AM-4PM

DEL AGUILA, FABIOLA







Provider Gender: Female
 License Number: PSY24471
 NPI: 1720283211
 Provider English Spoken: Y


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 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\None
Gender Restriction: No Gender
restriction
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\None
Gender Restriction: No Gender
restriction
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\None
Gender Restriction: No Gender
restriction
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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-6PM

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






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 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM






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\None
 Gender Restriction: No Gender
 restriction


American Sign Language (ASL): ANASTASIE M DUNN-PIRIO
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM







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\None
 Gender Restriction: No Gender
 restriction
 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

 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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

ESTAVILLO, SAUL

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

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

 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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

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PROVIDER
 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
 restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-6PM

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\None

Gender Restriction: No Gender
 restriction

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


Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER


 Hours: M-F 8AM-5PM


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\None

Gender Restriction: No Gender
 restriction

American Sign Language (ASL):

N






 Accessibility: CONTACT
 PROVIDER



 Hours: M-F 8AM-5PM

GARCIA, RICHARD

Provider Gender: Male
 License Number: LCS28742
 NPI: 1881198554

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 *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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

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\None
Gender Restriction: No Gender restriction
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\None
Gender Restriction: No Gender restriction
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

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☎ After Hours Phone: (800) 926-8372

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

PROVIDER
 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
 restriction

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\None

Gender Restriction: No Gender
 restriction

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)
 810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
 restriction

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

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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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

LIDLAW, JOHN

Provider Gender: Male

License Number: MFC44560

NPI: 1689790073

Provider English Spoken: Y
Cultural Competency: N

JOHN K LIDLAW

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\None

Gender Restriction: No Gender
restriction

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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

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TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM


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
 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\None
 Gender Restriction: No Gender restriction
 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\None
 Gender Restriction: No Gender restriction
 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM


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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM SA 8AM-2PM*

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

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\None

Gender Restriction: No Gender restriction

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


 4290 POLK AVE

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM SA 8AM-2PM*

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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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

MIRON, JEAN-PHILIPPE

Provider Gender: Male

License Number: A186033

NPI: 1952178196

☐ Provider English Spoken: Y

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\None

Gender Restriction: No Gender
restriction

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

MOORE, SHAVON



Provider Gender: Female

License Number: A152789

NPI: 1053682773



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 *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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*









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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*








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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

 *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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

NAKAMURA, TIFFANY

Provider Gender: Female
License Number: LPCC4383
NPI: 1356846349
 *Provider English Spoken: Y*
Cultural Competency: N
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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*


 *Provider English Spoken: Y*
Cultural Competency: N
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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

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*

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 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM


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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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
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\None

Gender Restriction: No Gender

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restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

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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

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\None

Gender Restriction: No Gender
restriction

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-6PM







QAYOUMI, WALI


Provider Gender: Male
License Number: A168429
NPI: 1093178220








Provider English Spoken: Y



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 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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM



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
 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\None
 Gender Restriction: No Gender
 restriction
 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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N



 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM


RICHARD, MARLA
 Provider Gender: Female
 License Number: G65188
 NPI: 1578720934
 Provider English Spoken: Y
 Cultural Competency: N
 MARLA G RICHARD
 16950 VIA TAZON





اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين
 إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على
 blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.








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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM


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\None
 Gender Restriction: No Gender restriction





American Sign Language (ASL): 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
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
 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
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM





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)


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246-0794
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\19
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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
 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-5PM






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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):

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- 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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
- 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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
- 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\None
-  *Gender Restriction: No Gender restriction*
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
- 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*
 *Website: N/A*
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
- SOLORIO JR, ROBERTO**
Provider Gender: Male

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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\None

Gender Restriction: No Gender
restriction

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\None

Gender Restriction: No Gender
restriction

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 Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

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

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 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

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N
 ♿ Accessibility: CONTACT PROVIDER

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM SA 8AM-2PM

VANFOSSEN, BRIAN
 Provider Gender: Male
 License Number: PSY23462
 NPI: 1396072500
 □ Provider English Spoken: Y
 Cultural Competency: N

BRIAN VANFOSSEN
 📍 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
 🕒 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

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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\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

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
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM

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\None
Gender Restriction: No Gender

restriction
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 Language(s) Spoken:
Spanish
TDD: U

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM

ZAYAS, MARIO

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ا. دليل الصحة النفسية

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU 9AM-7PM
W-F 9AM-6PM

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

Accepting New Patients: Yes

Site English Spoken: Y

☑ Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

ARIELLA, LYNDA

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Provider Gender: Female
License Number: PSY19450
NPI: 1073518965
 Provider English Spoken: Y
Cultural Competency: N
LYNDA R ARIELLA
 150 VALPRED 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
Gender Restriction: No Gender restriction
American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

CORTIZO, ROSA

Provider Gender: Female
License Number: PSY22278
NPI: 1952316648
 Provider English Spoken: Y
 Spanish
Cultural Competency: N
ROSA CORTIZO
 150 VALPRED 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\None
Gender Restriction: No Gender restriction
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 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\None
Gender Restriction: No Gender restriction
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 RD
 SAN MARCOS, CA 92069
 Phone: (760) 737-6767
Fax: (760) 736-8740
 After Hours Phone: (760) 737-6767
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
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

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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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 8AM-5PM

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729

NPI: 1972088185

Provider English Spoken: Y
Cultural Competency: N

ROBERTO SOLORIO 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\None

Gender Restriction: No Gender
restriction

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

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 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 TDD: U
 Min/Max Age: 4\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-8PM
 SA 8AM-5PM






TORRES, HECTOR



Provider Gender: Male
 License Number: PSY13309
 NPI: 1720265614
 Provider English Spoken: Y
 Spanish
 Cultural Competency: N
 HECTOR M TORRES
 150 VALPREDA 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\None
 Gender Restriction: No Gender
 restriction

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\None
 Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM

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\None
 Gender Restriction: No Gender
 restriction
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-8PM
 SA 8AM-2PM

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

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 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y

 Site Languages(s) Spoken:
 Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Hours: M-F 8AM-5PM

DIA, ALI

Provider Gender: Male

License Number: A47803


NPI: 1912031030


 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\None

Gender Restriction: No Gender
 restriction

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\None

Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER


 Hours: M-F 8AM-8PM
 SA 8AM-2PM

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\None

Gender Restriction: No Gender
 restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

 Hours: M-F 8AM-5PM

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

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 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

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 Languages(s) Spoken: Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER
 Hours: M-F 8AM-8PM
 SA 8AM-2PM

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\None

Gender Restriction: No Gender restriction


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM



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

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-8PM SA 8AM-2PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): 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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ا. دليل الصحة النفسية

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 8AM-5PM
TU 10:30AM-7:30PM
W-F 8AM-5PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-TH 8AM-2PM
F 8AM-5PM
SA 9AM-6PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-7PM
F 8AM-5PM
SA 9AM-4PM

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\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-7PM
F 8AM-5PM
SA 9AM-4PM

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)

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631-5000
 Website: N/A
 Accepting New Patients: Yes
 Site English Spoken: Y
 TDD: U
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-7PM
 F 8AM-5PM
 SA 9AM-4PM



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\None
 Gender Restriction: No Gender restriction


American Sign Language (ASL): License Number: LCS87166
 NPI: 1285170662

 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-7PM
 F 8AM-5PM
 SA 9AM-4PM



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\None
 Gender Restriction: No Gender restriction


American Sign Language (ASL):
 N


 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9AM-7PM
 F 9AM-5PM
 SA 9AM-4PM

CRUZ, VANESSA

Provider Gender: Female


 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 Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu
 TDD: U

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU 8AM-8PM
 W 9AM-7PM
 TH 8AM-8PM
 F 8AM-5PM
 SA 9AM-4PM

CRUZ, VANESSA

Provider Gender: Female
 License Number: LCS87166
 NPI: 1285170662

 Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ا. دليل الصحة النفسية

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-7PM
F 9AM-5PM
SA 9AM-4PM

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 Languages(s) Spoken:
Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu

TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8AM-8PM
W 9AM-7PM
TH 8AM-8PM
F 8AM-5PM
SA 9AM-4PM

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\None

Gender Restriction: No Gender
restriction

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9AM-8PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ا. دليل الصحة النفسية

F 9AM-5PM
SA 9AM-4PM

MELENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

Provider English Spoken: Y

Spanish

Cultural Competency: N

ADRIANA J MELENDEZ

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

MELENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

Provider English Spoken: Y

Spanish

Cultural Competency: N

ADRIANA J MELENDEZ

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-8PM
SA 9AM-4PM

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\None

Gender Restriction: No Gender
restriction

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\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

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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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM SA 8AM-4PM

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\None
 Gender Restriction: No Gender restriction
 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
 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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM
 TU 10AM-7PM
 W-F 8AM-5PM
 SA 9AM-4PM

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\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8AM-5PM
 TU 10AM-7PM
 W-F 8AM-5PM
 SA 9AM-4PM

SANCHEZ, ADRIANA
 Provider Gender: Female
 License Number: LCS97093
 NPI: 1609450451

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ا. دليل الصحة النفسية

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\None
Gender Restriction: No Gender
restriction
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
 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\None
Gender Restriction: No Gender
restriction
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\None
Gender Restriction: No Gender
restriction
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
 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\None
Gender Restriction: No Gender
restriction
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
 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
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\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-8PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

ALPINE

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

☐ Site 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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1U
🕒 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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































Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p>N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9AM-5PM TU 10AM-6PM W 9AM-5PM TH 8AM-5PM F 9AM-4PM</p>	<p>W 9AM-5PM TH 8AM-5PM F 9AM-4PM 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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9AM-5PM TU 10AM-6PM W 9AM-5PM TH 8AM-5PM F 9AM-4PM</p>	<p>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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>
<p>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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>	<p>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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>	<p>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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>
<p> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9AM-5PM TU 10AM-6PM</p>	<p>KATZMAN, BARRY, MD Provider Gender: Male License Number: A34834</p>	<p>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</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

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
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
 License Number: A155228
 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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within

1/2 mile from Site): 1U
 Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9AM-5PM
 TU 10AM-6PM
 W 9AM-5PM
 TH 8AM-5PM
 F 9AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. فضلًا بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL):  Hours: M 9AM-5PM
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-5PM
TU 10AM-6PM
W 9AM-5PM
TH 8AM-5PM
F 9AM-4PM

F 8AM-6PM
SA 9AM-2PM

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


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: TU 9AM-5PM
W 10AM-6PM
TH 9AM-5PM
F 8AM-4PM
SA 9AM-3PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 8AM-6:30PM
W 8AM-6PM
TH 12:30AM-6PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 8AM-5PM
TU 7AM-5PM
W-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-6PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Site Languages(s) Spoken: N
Arabic, Hindi, Spanish
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

HUANG, PETER, OD

Provider Gender: Male

License Number: 11659

NPI: 1639100522

Provider English Spoken: Y

Spanish

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9AM-5PM

TU 9AM-6PM

W 9AM-5PM

TH 9AM-6PM

F 8AM-4PM

SA 9AM-2PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

M-F 9AM-7PM
SA 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

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

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 9AM-6PM
SA 9AM-3PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH 9AM-6PM
F 9AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<input type="checkbox"/> Site English Spoken: Y	N	TU 7AM-5PM
<input type="checkbox"/> Site Languages(s) Spoken: Spanish, Vietnamese	Accessibility: CONTACT PROVIDER	W-F 8AM-5PM
Min/Max Age: 0\None	Public transportation (within 1/2 mile from Site): 1U	SCOVILL, ALEXANDRA, OD
Gender Restriction: No Gender restriction	Hours: SU 10AM-4PM M-F 9AM-7PM SA 9AM-5PM	Provider Gender: Female
American Sign Language (ASL): N		License Number: 33711
Accessibility: CONTACT PROVIDER	PLUCINIK, STANLEY, OD	NPI: 1184146094
Public transportation (within 1/2 mile from Site): 1T	Provider Gender: Male	Provider English Spoken: Y
Hours: M-TH 10AM-3PM	License Number: 35255	<input type="checkbox"/> Spanish
NGUYEN, THERESA, OD	NPI: 1124751417	Cultural Competency: Y
Provider Gender: Female	Provider English Spoken: Y	CASTILLEJOS EYE INSTITUTE
License Number: 35530TLG	Cultural Competency: Y	MED GROUP
NPI: 1609555713	CASTILLEJOS EYE INSTITUTE	342 F ST
Provider English Spoken: Y	MED GROUP	CHULA VISTA, CA 91910
Cultural Competency: Y	342 F ST	Phone: (619) 422-1471
OTAY RANCH EYEWORKS	CHULA VISTA, CA 91910	Fax: (619) 271-7044
OPTOMETRY	Phone: (619) 422-1471	After Hours Phone: (619) 422-1471
1741 EASTLAKE PKWY STE 101	Fax: (619) 271-7044	Accepting New Patients: Yes
CHULA VISTA, CA 91915	After Hours Phone: (619) 422-1471	<input type="checkbox"/> Site English Spoken: Y
Phone: (619) 421-6600	Accepting New Patients: Yes	<input type="checkbox"/> Site Languages(s) Spoken: French, Spanish, Tagalog
Fax: (619) 421-6006	<input type="checkbox"/> Site English Spoken: Y	Min/Max Age: 0\None
After Hours Phone: (619) 421-6600	<input type="checkbox"/> Site Languages(s) Spoken: French, Spanish, Tagalog	Gender Restriction: No Gender restriction
Accepting New Patients: Yes	Min/Max Age: 0\None	American Sign Language (ASL): N
<input type="checkbox"/> Site English Spoken: Y	Gender Restriction: No Gender restriction	Accessibility: CONTACT PROVIDER
<input type="checkbox"/> Site Languages(s) Spoken: Arabic, Hindi, Spanish	American Sign Language (ASL): N	Public transportation (within 1/2 mile from Site): 1T
Min/Max Age: 0\None	Accessibility: CONTACT PROVIDER	Hours: M 8AM-5PM TU 7AM-5PM W-F 8AM-5PM
Gender Restriction: No Gender restriction	Public transportation (within 1/2 mile from Site): 1T	SOLIS, KEVIN, OD
American Sign Language (ASL): Hours: M 8AM-5PM	Hours: M 8AM-5PM	Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10AM-4PM
M-F 9AM-7PM
SA 9AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9AM-6PM

CORONADO

KATZMAN, LEE, MD

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
Min/Max Age: 0\None
Gender Restriction: No Gender

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار


restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-4:30PM
TU 9AM-3PM
W-TH 9AM-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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-4:30PM

TU 9AM-3PM

W-TH 9AM-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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-4:30PM
TU 9AM-3PM

W-TH 9AM-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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-4:30PM
TU 9AM-3PM

W-TH 9AM-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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗣 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار


Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 9AM-5PM
SA 9AM-12AM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☑ Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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

☎ Phone: (619) 670-6296

Fax: (619) 670-8852

☎ After Hours Phone: (619) 670-6296

Accepting New Patients: Yes

☑ Site English Spoken: Y
☑ Site Language(s) Spoken: Italian, Spanish
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM

TU 10AM-5PM

W-TH 9AM-5PM

F 8AM-2PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): Provider Gender: Male

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

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 Language(s) Spoken: Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM
TU 10AM-5PM
W-TH 9AM-5PM
F 8AM-2PM

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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 9AM-5PM
 TU 10AM-5PM
 W-TH 9AM-5PM
 F 8AM-2PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8:30AM-6PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:30AM-6PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM



AOTO, KIM, OD

Provider Gender: Female
 License Number: 14524
 NPI: 1780935650
 Provider English Spoken: Y




اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.





ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction






American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM



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
Accepting New Patients: Yes
 Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM



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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):



N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

CHANG, TOM, MD

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

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

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL): **VIVIRITO, MARY, OD**

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

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

 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Gender Restriction: No Gender restriction
1/2 mile from Site): 1T
Hours: M-F

American Sign Language (ASL): 8:30AM-4:30PM

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (760) 743-5879

☎ After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F

8:30AM-4:30PM

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 Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

CHANG, TOM, MD

Provider Gender: Male

License Number: A69909

NPI: 1609848969

Provider English Spoken: Y

Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

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 Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

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
Fax: (760) 743-5879
🕒 After Hours Phone: (760)
743-5872
Accepting New Patients: Yes
🗨 Site English Spoken: Y
🗨 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM


























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
Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p><i>Gender Restriction: No Gender restriction</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Public transportation (within 1/2 mile from Site): 1T</i></p> <p> <i>Hours: M-F 8:30AM-4:30PM</i></p> <p>LE, TAM, OD</p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: 12951</i></p> <p><i>NPI: 1235268707</i></p> <p><i>Provider English Spoken: Y</i></p> <p> <i>Spanish, Vietnamese</i></p> <p><i>Cultural Competency: Y</i></p> <p>TAM T LE OD INC</p> <p> 1711 E VALLEY PKWY STE 109 ESCONDIDO, CA 92027</p> <p> <i>Phone: (760) 737-6064</i></p> <p><i>Fax: (760) 737-6064</i></p> <p> <i>After Hours Phone: (760) 737-6064</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Y</i></p> <p> <i>Site Languages(s) Spoken: Spanish, Vietnamese</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>Gender Restriction: No Gender restriction</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Public transportation (within 1/2 mile from Site): 1T</i></p> <p> <i>Hours: M-TH 9AM-5:30PM F 9AM-1PM</i></p> <p>LEE, JASON, OD</p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: 14881</i></p> <p><i>NPI: 1679985584</i></p> <p><i>Provider English Spoken: Y</i></p> <p> <i>Spanish</i></p> <p><i>Cultural Competency: Y</i></p> <p>RADY CHILDRENS SPECIALISTS</p> <p> 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029</p> <p> <i>Phone: (760) 755-7600</i></p> <p><i>Fax: (760) 755-7699</i></p> <p> <i>After Hours Phone: (760) 755-7600</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Y</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>Gender Restriction: No Gender restriction</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Public transportation (within 1/2 mile from Site): 1T</i></p> <p> <i>Hours: M-F 8:30AM-4:30PM</i></p> <p>MARR, RYAN, OD</p> <p><i>Provider Gender: Male</i></p>	<p><i>License Number: 35302</i></p> <p><i>NPI: 1235857525</i></p> <p><i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: Y</i></p> <p>ACUITY EYE GROUP</p> <p> 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026</p> <p> <i>Phone: (760) 743-5872</i></p> <p><i>Fax: (760) 743-5879</i></p> <p> <i>After Hours Phone: (760) 743-5872</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Y</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>Gender Restriction: No Gender restriction</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Public transportation (within 1/2 mile from Site): 1T</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p>MCGRAW, JOSEPH, MD</p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A155228</i></p> <p><i>NPI: 1588624852</i></p> <p><i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: Y</i></p> <p>ACUITY EYE GROUP</p> <p> 700 W EL NORTE PKWY STE 200 ESCONDIDO, CA 92026</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ 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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Fax: (760) 755-7699

📞 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

☑ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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

☎ 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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

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, SARJAN, MD

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9:30AM-5PM TH 10AM-5:30PM F 9:30AM-5PM

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

🗪 Site English Spoken: Y

🗪 Site Languages(s) Spoken: Spanish

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-6PM
W-TH 9AM-8PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (760) 743-5879

☎ After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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 Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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 Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

COLEMAN, BROOKE, OD

Provider Gender: Female

License Number: 13551

NPI: 1700040748

Provider English Spoken: Y

Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 1PM-5PM
TU 9AM-6PM
W-TH 9AM-5PM
F 9AM-1PM
SA 9AM-1PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 1PM-5PM
TU 9AM-6PM
W-TH 9AM-5PM
F 9AM-1PM
SA 9AM-1PM

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

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

IMPERIAL BEACH

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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 9AM-6PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 9AM-6PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ 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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N
 ♿ Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 🕒 Hours: M-F 8AM-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
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM
SA 8AM-2PM

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

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM
SA 8AM-2PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM
SA 8AM-2PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

📄 French

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4:30PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM
SA 8AM-2PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM
SA 8AM-2PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4:30PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4:30PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM
SA 8AM-2PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9AM-5PM

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 Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM
SA 8AM-2PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM
SA 8AM-2PM

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 Language(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-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
📞 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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-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:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Spanish, Tagalog
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM SA 8AM-2PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

📞 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4:30PM

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

🗨 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): Provider Gender: Male

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM
SA 8AM-2PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M 10AM-4PM
W 10AM-4PM
F 10AM-4PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540
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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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
























Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Public transportation (within 1/2 mile from Site): 1U</i>  <i>Hours: M-F 8AM-5PM</i></p>	<p>CAUCHI, CAROLINE GUERRERO, OD <i>Provider Gender: Female</i> <i>License Number: 6882</i> <i>NPI: 1831268903</i> <i>Provider English Spoken: Y</i></p>	<p><i>NPI: 1609848969</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: Y</i> EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP</p>
<p>BINDER, NICHOLAS, MD <i>Provider Gender: Male</i> <i>License Number: A124698</i> <i>NPI: 1306076716</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: Y</i> ACUITY EYE GROUP  7339 EL CAJON BLVD STE J LA MESA, CA 91942  <i>Phone: (619) 722-8460</i> <i>Fax: (619) 722-8465</i>  <i>After Hours Phone: (619) 722-8460</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Y</i>  <i>Site Languages(s) Spoken: Spanish</i> <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i> <i>American Sign Language (ASL): N</i></p>	<p> <i>Spanish</i> <i>Cultural Competency: Y</i> VISION SOLUTIONS OPTOMETRY  8235 UNIVERSITY AVE LA MESA, CA 91942  <i>Phone: (619) 461-4913</i> <i>Fax: (888) 509-6483</i>  <i>After Hours Phone: (619) 461-4913</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Y</i>  <i>Site Languages(s) Spoken: Spanish</i> <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i> <i>American Sign Language (ASL): N</i></p>	<p> 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942  <i>Phone: (619) 465-2020</i> <i>Fax: (619) 698-1189</i>  <i>After Hours Phone: (619) 465-2020</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Y</i>  <i>Site Languages(s) Spoken: Spanish</i> <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i> <i>American Sign Language (ASL): N</i></p>
<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Public transportation (within 1/2 mile from Site): 1T</i>  <i>Hours: M-F 8AM-5PM</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i> <i>Public transportation (within 1/2 mile from Site): 1T</i>  <i>Hours: M-TU 9AM-5:30PM</i> <i>W 8AM-5PM</i> <i>TH 9AM-6PM</i> <i>F 8AM-1PM</i></p>	<p>CHEW, WESLEY, OD <i>Provider Gender: Male</i> <i>License Number: 14901</i> <i>NPI: 1952714446</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: Y</i> ACUITY EYE GROUP  7339 EL CAJON BLVD STE J LA MESA, CA 91942</p>
<p>CHANG, TOM, MD <i>Provider Gender: Male</i> <i>License Number: A69909</i></p>		

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ 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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

📍 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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

DEAN, MOENA, OD

Provider Gender: Female

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 8AM-4PM TU 9AM-6PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

W 8AM-4PM
TH 9AM-6PM
F 9AM-5PM
SA 8AM-1PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 8AM-4PM

TU 9AM-6PM

W 8AM-4PM

TH 9AM-6PM

F 9AM-5PM

SA 8AM-1PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT

PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

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
 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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

KALBAKJI, NATALY, OD

Provider Gender: Female
 License Number: 34943

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F 8AM-5PM

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
Fax: (619) 698-1189
🕒 After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
🗨 Site English Spoken: Y
🗨 Site Languages(s) Spoken:
Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: TU-W 9AM-5PM

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



اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.



ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p>  Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T  Hours: M-F 8AM-5PM </p>	<p> 1/2 mile from Site): 1U  Hours: M 10AM-5PM TU-TH 9AM-6PM F 10AM-5PM </p>	<p> 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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M-F 8AM-5PM </p>
<p> 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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within </p>	<p> MARR, RYAN, OD Provider Gender: Male License Number: 35302 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 Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T  Hours: M-F 8AM-5PM </p>	<p> 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 </p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار



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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 8AM-5PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 10AM-4PM
W 10AM-4PM
F 10AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☐ Site Languages(s) Spoken: restriction
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-5:30PM
W 8AM-5PM
TH 9AM-6PM
F 8AM-1PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

Provider English Spoken: Y

Site 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

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

TSUI, NANCY, OD

Provider Gender: Female

License Number: 33944

NPI: 1841785037

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

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM


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

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (619) 722-8465

☎ After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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 Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

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

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 Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

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
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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-TH 9AM-5PM
F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-TH 9AM-5PM
F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-TH 9AM-5PM
F 9AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

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 Language(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

DYER, SHARON, OD

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM

F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☎ Phone: (619) 470-2700
Fax: (619) 267-8221

🕒 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

🗨 Site English Spoken: Y
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): TH 8AM-6PM
F 8AM-5PM

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

KATZMAN, BARRY, MD

Provider Gender: Male

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

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


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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



Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M-F 8AM-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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1U

 **Hours: M-F 8AM-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


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM**

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


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 **Accessibility: CONTACT PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

 **Hours: TU 10AM-5PM
W-F 9:30AM-5PM**


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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

📍 Site Languages(s) Spoken: 1/2 mile from Site): 1U
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 10AM-6PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

🕒 Hours: M 10AM-6PM

W 10AM-6PM

F 10AM-6PM

SA 10AM-2PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-5PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Fax: (619) 479-5233

☎ After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

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 Language(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-TU 10AM-5PM
TH-F 10AM-5PM

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 Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

📍 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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

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 Language(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: SU 10AM-4PM

M-F 9AM-6PM

SA 9AM-5PM

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

📍 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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: SU 10AM-4PM
M-F 9AM-6PM
SA 9AM-5PM

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

Accepting New Patients: Yes

🗨 Site English Spoken: Y

🗨 Site Languages(s) Spoken:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

☐ Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

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

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: TU 10AM-5PM
W-F 9:30AM-5PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642

NPI: 1336211804

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

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 8AM-6PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-5PM

OCEANSIDE

KASAI, SARAH, OD

Provider Gender: Female
License Number: 34226

NPI: 1023406238

Provider English Spoken: Y

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM
F 9AM-5PM

RING, ROBERT, OD

Provider Gender: Male

License Number: 6781

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 10AM-6PM
TU 9AM-4PM
W 9AM-5PM
F 9AM-12AM

ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

Site 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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM
W 10AM-7PM
TH 9AM-6PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

F 9AM-5PM

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


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM
SA 8AM-11AM

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


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

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


Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F 7AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL):  Hours: M 7:30AM-4:30PM
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM


AOTO, KIM, OD

Provider Gender: Female

License Number: 14524


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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  Hours: M-F 8AM-5PM
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM
SA 8:30AM-2PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 7AM-5PM

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)

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

565-8822
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10AM-6PM
 TU 8:30AM-5PM
 W 7:30AM-4PM
 TH 9:30AM-5PM
 F 8AM-4PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
 TU 8AM-5PM
 W 8:30AM-5PM
 TH 8AM-6PM
 F 8AM-4PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 7AM-5PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL):
 N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

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

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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
Accepting New Patients: Yes
📄 Site English Spoken: Y
📄 Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M 8AM-5PM
TU-TH 9AM-6PM
F 8AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 10AM-7PM
SA 10AM-7PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-5:30PM
SA 9AM-3PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9:30AM-6PM
SA 9AM-3PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-5PM
W 10AM-6PM
F 9AM-5PM
SA 9AM-1PM

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:

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.


ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-W 9AM-5PM
TH 9AM-1:30PM
F 9AM-5PM
SA 9AM-1PM



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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM
SA 8:30AM-2PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 8AM-5PM
SA 8:30AM-2PM

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) 291-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 10AM-7PM
SA 10AM-7PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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 Language(s) Spoken: Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 9AM-5:30PM SA 9AM-3PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 10AM-6PM TU 8:30AM-5PM W 7:30AM-4PM TH 9:30AM-5PM F 8AM-4PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT

PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 7AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-5PM SA 8:30AM-2PM

Accepting New Patients: Yes
☑ Site English Spoken: Y
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F 8AM-5PM SA 8:30AM-2PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM

TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM
SA 9AM-1PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: TH-F 9AM-5PM

HOANG, KEVIN, OD

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9AM-5PM SA 9AM-1PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 9AM-5PM SA 9AM-1PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TH 9AM-5PM
F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4PM

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

📍 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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9:30AM-6PM

W 9:30AM-6PM

TH-F 10AM-6PM

SA 9AM-3PM

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 Languages(s) Spoken:
Spanish, Tagalog,
Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p>Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Tagalog Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1T 🕒 Hours: M 9AM-4PM TU 7AM-1PM W-TH 10AM-7PM F 10AM-3PM SA 9AM-2PM</p>	<p>restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U 🕒 Hours: M 10AM-6PM TU 8:30AM-5PM W 7:30AM-4PM TH 9:30AM-5PM F 8AM-4PM</p>	<p>1/2 mile from Site): 1U 🕒 Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM TH 8AM-6PM F 8AM-4PM</p>
<p>KALBAKJI, NATALY, OD Provider Gender: Female License Number: 34943 NPI: 1700556438 Provider English Spoken: Y <input type="checkbox"/> 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 <input type="checkbox"/> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender</p>	<p>KALBAKJI, NATALY, OD Provider Gender: Female License Number: 34943 NPI: 1700556438 Provider English Spoken: Y <input type="checkbox"/> 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 <input type="checkbox"/> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U 🕒 Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM TH 8AM-6PM F 8AM-4PM</p>	<p>KATZMAN, BARRY, MD Provider Gender: Male License Number: A34834 NPI: 1760473797 Provider English Spoken: Y <input type="checkbox"/> 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 <input type="checkbox"/> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U 🕒 Hours: M 7:30AM-4:30PM TU 8AM-5PM W 8:30AM-5PM TH 8AM-6PM F 8AM-4PM</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM
SA 9AM-1PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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 Language(s) Spoken: Bengali, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TH 8AM-5PM
F 8AM-4PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777


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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM
SA 8:30AM-2PM

KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): Provider Gender: Female

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

LARSEN, STEVEN, OD

Provider Gender: Male

License Number: 7687

NPI: 1629194782

Provider English Spoken: Y

Spanish

Cultural Competency: Y

UPTOWN OPTOMETRY

4096 PARK BLVD

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: TU-F 9AM-3PM SA 10AM-2PM

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: N
 Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 10AM-7PM SA 10AM-7PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F 9AM-5:30PM SA 9AM-3PM

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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F 9:30AM-6PM SA 9AM-3PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU 9AM-5PM
W 10AM-6PM
TH 9AM-5PM
F 10AM-6PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

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

Min/Max Age: 0\None

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 10AM-7PM SA 10AM-7PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

PROVIDER

Public transportation (within

1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-5:30PM SA 9AM-3PM

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 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 9:30AM-6PM SA 9AM-3PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH 11AM-6PM F 1PM-5PM SA 9AM-1PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

MOLL, ANGELA, MD

Provider Gender: Female
License Number: A105472
NPI: 1861648602
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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F 7AM-5PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F 8AM-5PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F 8AM-4PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

NGUYEN, BRUCE, OD

Provider Gender: Male
License Number: 14156
NPI: 1376839019
Provider English Spoken: Y

Vietnamese
Cultural Competency: Y
CLAIREMONT OPTOMETRY

10715 TIERRASANTA BLVD
STE F
SAN DIEGO, CA 92124
Phone: (858) 279-6500
Fax: (858) 225-7174

After Hours Phone: (858)
279-6500

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Vietnamese
Min/Max Age: 0\None
Gender Restriction: No Gender

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p>restriction</p> <p>American Sign Language (ASL): 1/2 mile from Site): 1U</p> <p>N</p> <p>♿ Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1T</p> <p>🕒 Hours: M-W 9AM-6PM TH-F 9AM-5PM SA 8AM-3PM</p> <p>NGUYEN, THANH, OD</p> <p>Provider Gender: Female</p> <p>License Number: 13126</p> <p>NPI: 1992813323</p> <p>Provider English Spoken: Y</p> <p>🇻🇳 Vietnamese</p> <p>Cultural Competency: Y</p> <p>SABRE SPRINGS OPTOMETRY</p> <p>📍 12650 SABRE SPGS PKWY STE 203 SAN DIEGO, CA 92128</p> <p>☎ Phone: (858) 748-1265</p> <p>Fax: (844) 269-9527</p> <p>🕒 After Hours Phone: (858) 748-1265</p> <p>Accepting New Patients: Yes</p> <p>🇺🇸 Site English Spoken: Y</p> <p>🇪🇸 Site Languages(s) Spoken: Spanish, Vietnamese</p> <p>Min/Max Age: 0\None</p> <p>Gender Restriction: No Gender restriction</p> <p>American Sign Language (ASL): N</p> <p>♿ Accessibility: CONTACT PROVIDER</p>	<p>Public transportation (within 1/2 mile from Site): 1U</p> <p>🕒 Hours: M-TU 9AM-5PM W 10AM-6PM TH 9AM-5PM F 10AM-6PM</p> <p>NGUYEN, HOA PHUONG, OD</p> <p>Provider Gender: Female</p> <p>License Number: 12630</p> <p>NPI: 1962439265</p> <p>Provider English Spoken: Y</p> <p>🇻🇳 Vietnamese</p> <p>Cultural Competency: Y</p> <p>COLLEGE GROVE OPTOMETRY</p> <p>📍 4560 COLLEGE AVE SAN DIEGO, CA 92115</p> <p>☎ Phone: (619) 583-5744</p> <p>Fax: (619) 582-6112</p> <p>🕒 After Hours Phone: (619) 583-5744</p> <p>Accepting New Patients: Yes</p> <p>🇺🇸 Site English Spoken: Y</p> <p>Min/Max Age: 0\None</p> <p>Gender Restriction: No Gender restriction</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 9AM-5PM</p> <p>NGUYEN, KELVIN, OD</p> <p>Provider Gender: Male</p>	<p>License Number: 11085</p> <p>NPI: 1518923572</p> <p>Provider English Spoken: Y</p> <p>🇪🇸 Spanish</p> <p>Cultural Competency: Y</p> <p>SAN DIEGO VISION CARE OPTOMETRY</p> <p>📍 3807 FAIRMOUNT AVE STE 200 SAN DIEGO, CA 92105</p> <p>☎ Phone: (619) 508-5678</p> <p>Fax: (619) 501-0686</p> <p>🕒 After Hours Phone: (619) 508-5678</p> <p>Accepting New Patients: Yes</p> <p>🇺🇸 Site English Spoken: Y</p> <p>🇪🇸 Site Languages(s) Spoken: Spanish, Vietnamese</p> <p>Min/Max Age: 0\None</p> <p>Gender Restriction: No Gender restriction</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 9AM-5PM</p> <p>NGUYEN, JASMINE, OD</p> <p>Provider Gender: Female</p> <p>License Number: 11189</p> <p>NPI: 1497896922</p> <p>Provider English Spoken: Y</p> <p>🇻🇳 Vietnamese</p> <p>Cultural Competency: Y</p> <p>JASMINE P NGUYEN OD INC</p>
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اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM
SA 9AM-1PM

NGUYEN, THANH, OD

Provider Gender: Female

License Number: 13126

NPI: 1992813323

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM
SA 9AM-1PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction


اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

American Sign Language (ASL):  Hours: M 10AM-6PM
N
TU 10AM-2PM

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-TU 9:30AM-6PM
TH-F 9:30AM-6PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 10AM-2PM
W-TH 10AM-6PM
F 9AM-2PM
SA 9AM-2PM

POUSTI, SHEIVA, OD

Provider Gender: Female

License Number: 10403

NPI: 1730240052

Provider English Spoken: Y


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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: SU-SA 9AM-6PM

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

Min/Max Age: 0\None


Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM
TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y


























 Spanish

Cultural Competency: Y

WEST COAST EYE CARE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<p> 4344 CONVOY ST STE C2 SAN DIEGO, CA 92111</p> <p> Phone: (858) 565-8822 Fax: (858) 565-2449</p> <p> After Hours Phone: (858) 565-8822</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1U</p> <p> Hours: M 10AM-6PM TU 8:30AM-5PM W 7:30AM-4PM TH 9:30AM-5PM F 8AM-4PM</p>	<p>Accepting New Patients: Yes</p> <p> Site English Spoken: Y</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Min/Max Age: 0\None Gender Restriction: No Gender restriction</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1U</p> <p> Hours: M-F 9AM-5:30PM SA 9AM-3PM</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 9AM-4PM TU 7AM-1PM W-TH 10AM-7PM F 10AM-3PM SA 9AM-2PM</p>
<p>SANDOC, EMILY, OD</p> <p>Provider Gender: Female License Number: 13535 NPI: 1992969794</p> <p>Provider English Spoken: Y Cultural Competency: Y</p> <p>OPTOM-EYES VISION CARE OPTOMETRY</p>	<p>SHULKIN, MITCHELL, OD</p> <p>Provider Gender: Male License Number: 8153 NPI: 1770531865</p> <p>Provider English Spoken: Y Cultural Competency: Y</p> <p>NORTH COUNTY OPTOMETRY</p>	<p>SOLIS, KEVIN, OD</p> <p>Provider Gender: Male License Number: 10420 NPI: 1538362116</p> <p>Provider English Spoken: Y Cultural Competency: Y</p> <p>OPTOM-EYES VISION CARE OPTOMETRY</p>
<p> 5638 MISSION CENTER RD STE 103 SAN DIEGO, CA 92108</p> <p> Phone: (619) 295-2900 Fax: (888) 210-5799</p> <p> After Hours Phone: (619) 295-2900</p>	<p> 11835 CARMEL MTN RD STE 1313 SAN DIEGO, CA 92128</p> <p> Phone: (858) 674-1276 Fax: (858) 674-5863</p> <p> After Hours Phone: (858) 674-1276</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Y</p> <p> Site Languages(s) Spoken: Tagalog</p> <p>Min/Max Age: 0\None Gender Restriction: No Gender restriction</p>	<p> 5638 MISSION CENTER RD STE 103 SAN DIEGO, CA 92108</p> <p> Phone: (619) 295-2900 Fax: (888) 210-5799</p> <p> After Hours Phone: (619) 295-2900</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Y</p> <p> Site Languages(s) Spoken: Spanish</p> <p>Min/Max Age: 0\None Gender Restriction: No Gender restriction</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT</p>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-5:30PM
SA 9AM-3PM

SOLIS, KEVIN, OD

Provider Gender: Male

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 10AM-7PM
SA 10AM-7PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 9:30AM-6PM
SA 9AM-3PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM
SA 9AM-1PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

<input type="checkbox"/> Site English Spoken: Y	restriction	SA 9AM-3PM
<input type="checkbox"/> Site Languages(s) Spoken: Spanish	American Sign Language (ASL): N	TILLMAN, SYLVIA, OD
Min/Max Age: 0\None	Accessibility: CONTACT PROVIDER	Provider Gender: Female
Gender Restriction: No Gender restriction	Public transportation (within 1/2 mile from Site): 1U	License Number: 9726
American Sign Language (ASL): N	Hours: M-F 9AM-5:30PM SA 9AM-3PM	NPI: 1174730824
Accessibility: CONTACT PROVIDER	TAM, MAY, OD	Provider English Spoken: Y
Public transportation (within 1/2 mile from Site): 1T	Provider Gender: Female	<input type="checkbox"/> Spanish
Hours: M-F 10AM-7PM SA 10AM-7PM	License Number: 11960	Cultural Competency: Y
TAM, MAY, OD	NPI: 1548255896	JASMINE P NGUYEN OD INC
Provider Gender: Female	Provider English Spoken: Y	4029 43RD ST STE 300
License Number: 11960	<input type="checkbox"/> Spanish	SAN DIEGO, CA 92105
NPI: 1548255896	Cultural Competency: Y	Phone: (619) 284-3937
Provider English Spoken: Y	OPTOM-EYES VISION CARE OPTOMETRY	Fax: (619) 284-3938
<input type="checkbox"/> Spanish	1555 PALM AVE STE A2	After Hours Phone: (619) 284-3937
Cultural Competency: Y	SAN DIEGO, CA 92154	Accepting New Patients: Yes
OPTOM-EYES VISION CARE OPTOMETRY	Phone: (619) 297-2020	<input type="checkbox"/> Site English Spoken: Y
5638 MISSION CENTER RD STE 103	Fax: (888) 210-5799	<input type="checkbox"/> Site Languages(s) Spoken: Spanish, Vietnamese
SAN DIEGO, CA 92108	After Hours Phone: (619) 297-2020	Min/Max Age: 0\None
Phone: (619) 295-2900	Accepting New Patients: Yes	Gender Restriction: No Gender restriction
Fax: (888) 210-5799	<input type="checkbox"/> Site English Spoken: Y	American Sign Language (ASL): N
After Hours Phone: (619) 295-2900	Min/Max Age: 0\None	Accessibility: CONTACT PROVIDER
Accepting New Patients: Yes	Gender Restriction: No Gender restriction	Public transportation (within 1/2 mile from Site): 1T
<input type="checkbox"/> Site English Spoken: Y	American Sign Language (ASL): N	Hours: M-F 9AM-5PM SA 9AM-1PM
<input type="checkbox"/> Site Languages(s) Spoken: Spanish	Accessibility: CONTACT PROVIDER	TON-NU, MY LINH, OD
Min/Max Age: 0\None	Public transportation (within 1/2 mile from Site): 1T	Provider Gender: Female
Gender Restriction: No Gender restriction	Hours: M-F 9:30AM-6PM	License Number: 34990

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None
*Gender Restriction: No Gender
restriction*
*American Sign Language (ASL):
N*
♿ Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site): 1U*
🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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
Min/Max Age: 0\None
*Gender Restriction: No Gender
restriction*
*American Sign Language (ASL):
N*
♿ Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site): 1U*
🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

TONNU, ANH, OD

Provider Gender: Female
License Number: 11318
NPI: 1679521280
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
Min/Max Age: 0\None
*Gender Restriction: No Gender
restriction*

*American Sign Language (ASL):
N*
♿ Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site): 1U*
🕒 Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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
Min/Max Age: 0\None
*Gender Restriction: No Gender
restriction*
*American Sign Language (ASL):
N*
♿ Accessibility: CONTACT
PROVIDER
*Public transportation (within
1/2 mile from Site): 1U*

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M 7:30AM-4:30PM
TU 8AM-5PM
W 8:30AM-5PM
TH 8AM-6PM
F 8AM-4PM

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
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F 7AM-5PM

TRANG, CHAU, OD

Provider Gender: Female
License Number: 9556
NPI: 1073671087

Provider English Spoken: Y

📄 French, Spanish,
Vietnamese, 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

Min/Max Age: 0\None
Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 10AM-3PM
W 10AM-3PM
F 10AM-5PM
SA 9AM-1PM

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F 9:30AM-6PM
SA 9AM-3PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

Accepting New Patients: Yes N
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M 8AM-5PM
 TU-TH 9AM-6PM
 F 8AM-5PM

VIVIRITO, MARY, OD

Provider Gender: Female
 License Number: 33798
 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
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction
 American Sign Language (ASL):

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10AM-6PM
 TU 8:30AM-5PM
 W 7:30AM-4PM
 TH 9:30AM-5PM
 F 8AM-4PM

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

Site English Spoken: Y
 Min/Max Age: 0\None
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

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
 Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

ZHAO, TAILUN, MD

Provider Gender: Male
 License Number: C186414
 NPI: 1952659203

Provider English Spoken: Y
 Cultural Competency: Y

WEST COAST EYE CARE

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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
Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10AM-6PM
TU 8:30AM-5PM
W 7:30AM-4PM
TH 9:30AM-5PM
F 8AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

PRESTERA, TORY, MD

Provider Gender: Male

License Number: A62321

NPI: 1346224557

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

🕒 Hours: M-F 8AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-3PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM

TU 9AM-6PM

W 9AM-5PM

TH 9AM-6PM

F 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM

TU 9AM-6PM

W 9AM-5PM

TH 9AM-6PM

F 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9AM-5PM
TU 9AM-6PM
W 9AM-5PM
TH 9AM-6PM
F 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: M 9AM-5PM

TU 9AM-5:30PM

W-TH 9AM-5PM

F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: M 9AM-5PM

TU 9AM-5:30PM

W-TH 9AM-5PM

F 9AM-4PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: M 9AM-5PM

TU 9AM-5:30PM

W-TH 9AM-5PM

F 9AM-4PM

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

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM SA 9AM-5PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM SA 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM SA 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

SA 9AM-5PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 9AM-6PM
SA 9AM-5PM

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:
Arabic, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F 9AM-6PM
SA 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9AM-6PM
TU-F 9AM-5PM

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:

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ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار


Spanish
Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9AM-6PM
TU-F 9AM-5PM

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


Min/Max Age: 0\None
Gender Restriction: No Gender restriction
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 9AM-6PM
TU-F 9AM-5PM


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

Min/Max Age: 0\None
Gender Restriction: No Gender restriction


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU 9AM-6PM


W 7AM-5PM
TH 9AM-6PM


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

Min/Max Age: 0\None
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

GEORGE, BRUCE, OD

Provider Gender: Male
License Number: 7696

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

ل. دليل مقدمي خدمات الإبصار - خدمات العين والإبصار

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9AM-5PM
TU-W 9AM-6PM
TH-F 9AM-5PM

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

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH 10AM-5PM

TRAN, THAO, OD

Provider Gender: Female

License Number: 12867

NPI: 1962581421

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

KINDERSPECS-GOOD EYES

OPTOMETRY

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

جدول ECM للمجموعة محل التركيز (POF)

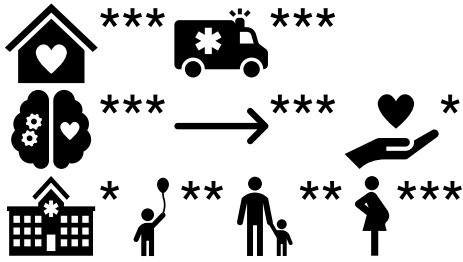
الأطفال والشباب	البالغون	جدول ECM للمجموعة محل التركيز
✓	✓	1 لأفراد الذين يعانون التشرد 
✓	✓	2 الأفراد المعرضون لخطر استخدام المستشفى أو قسم الطوارئ (ED) الذي يمكن تجنبه (يطلق عليهم رسميًا "المستخدمون المرتفعون") 
✓	✓	3 لأفراد الذين يعانون اضطرابات عقلية خطيرة و/أو اضطرابات تعاطي المخدرات 
✓	✓	4 لأفراد الذين ينتقلون من السجن 
	✓	5 البالغون الذين يعيشون في المجتمع والمعرضون لخطر الرعاية طويلة الأجل (LTC) المؤسسية 
	✓	6 المقيمون في مرافق تمريض البالغين الذين ينتقلون إلى المجتمع 
✓		7 الأطفال والشباب المسجلون في خدمات الأطفال في (California CCS) أو نموذج CCS للطفل الشامل (WCM) مع احتياجات إضافية تتجاوز حالة CCS 
✓		8 الأطفال والشباب المشاركون في Child Welfare لرعاية الطفل 
✓	✓	9 المجموعة محور التركيز التابعة لـ Birth Equity لعدالة الولادة 

K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

EL CAJON

LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:

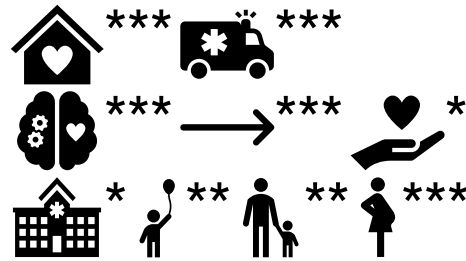


Community Supports Services:
N/A
Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

Jl ECM Provider Billing- Direct
Contract with Correctional
Facilities;Jl ECM Provider
Billing- FFS (PAVE Enrollment)
Jl ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105
Jl ECM Provider Billing- Direct
Contract with Correctional
Facilities;Jl ECM Provider
Billing- FFS (PAVE Enrollment)
Jl ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

ENCINITAS

SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE

1084 N EL CAMINO REAL
STE B149
ENCINITAS, CA 92024
Phone: (619) 273-3295
After Hours Phone: (619)
273-3295
Accessibility: CONTACT

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM† والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرذ غير المحمي

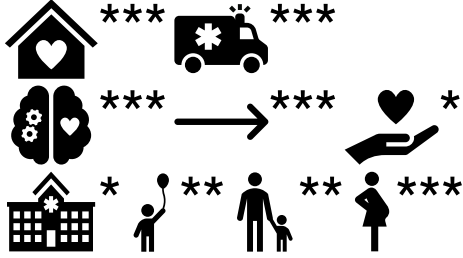
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N

Phone for Existing Patients:
(619) 273-3295

Mailing Address: 1084 N EL
CAMINO REAL STE

B-149;Encinitas;CA;92024

JI ECM Provider Billing- FFS
(PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services
and Participating in Warm
Handoffs;JI ECM Provider
Services-Warm Handoffs Only

ESCONDIDO

INTERFAITH COMMUNITY SERVICES

550 W WASHINGTON AVE
ESCONDIDO, CA 92025

Phone: (760) 489-6380

After Hours Phone: (760)
489-6380

Accessibility: CONTACT
PROVIDER

Website: N/A

Community Supports Services:

Housing Deposits,Housing
Tenancy and Sustaining
Services,Housing Transition
Navigation

Services,Recuperative Care
(Medical Respite),Short-Term
Post-Hospitalization Housing

Street Medicine Provider: N

Phone for Existing Patients:
(760) 489-6380

IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

949 PALM AVE
IMPERIAL BEACH, CA
91932

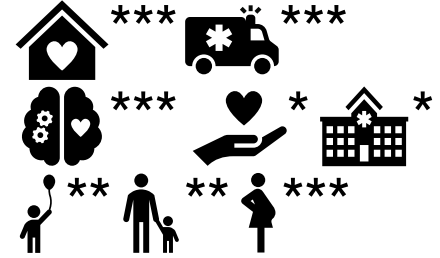
Phone: (619) 429-3733

After Hours Phone: (619)
429-3733

Accessibility: CONTACT
PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N

Phone for Existing Patients:
(619) 429-3733

LEMON GROVE

LA MAESTRA COMMUNITY HEALTH CENTERS

7967 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 510-4641

After Hours Phone: (619)

*الكبار **الأطفال ***الكبار والأطفال على حد سواء


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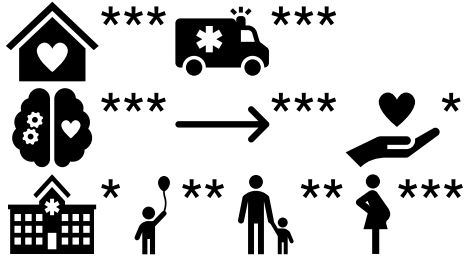
K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

510-4641

 Accessibility: CONTACT PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N



Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105


JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

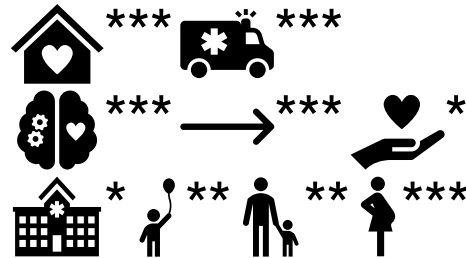
 7967 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 510-4641
 After Hours Phone: (619)
510-4641

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641



Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105


JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

NATIONAL CITY

LA MAESTRA COMMUNITY HEALTH CENTERS

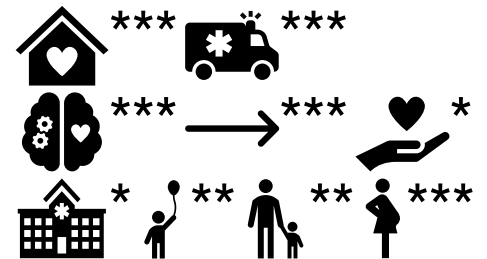
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 510-4641
 After Hours Phone: (619)
510-4641

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Community Supports Services: N/A

Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641

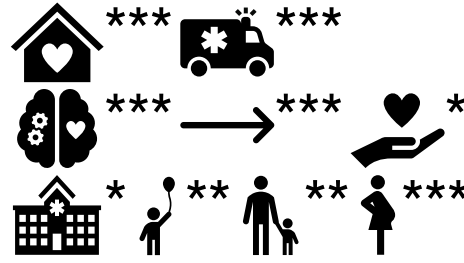
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

ORINDA

PATHWAY HOME

SOLUTIONS INC

2 BIRCH CT
ORINDA, CA 94563
Phone: (209) 601-0734
After Hours Phone: (209)
601-0734
Accessibility: CONTACT
PROVIDER
Website: N/A

Community Supports Services:
Environmental Accessibility
Adaptations (Home
Modifications)
Street Medicine Provider: N
Phone for Existing Patients:
(209) 601-0734

SAN DIEGO

PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619)
810-8668
Accessibility: CONTACT
PROVIDER
Website: N/A

Community Supports Services:

*الكبار**الأطفال***الكبار والأطفال على حد سواء

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation

Services, Recuperative Care (Medical Respite), Short-Term Post-Hospitalization Housing Street Medicine Provider: N Phone for Existing Patients: (619) 810-8668

PEOPLE ASSISTING THE HOMELESS

1250 SIXTH AVE
SAN DIEGO, CA 92101
Phone: (619) 810-8668
After Hours Phone: (619) 810-8668
Accessibility: CONTACT PROVIDER
Website: N/A

Community Supports Services: N/A
Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation
Services, Recuperative Care (Medical Respite), Short-Term

Post-Hospitalization Housing Street Medicine Provider: N Phone for Existing Patients: (619) 810-8668

SAN DIEGO FAMILY CARE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Accessibility: CONTACT PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N
Phone for Existing Patients: (858) 279-0925

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Accessibility: CONTACT PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N
Phone for Existing Patients: (858) 810-8700

JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
Phone: (858) 637-3221
After Hours Phone: (858) 637-3221
Accessibility: CONTACT PROVIDER
Website: N/A

ECM Population of Focus:

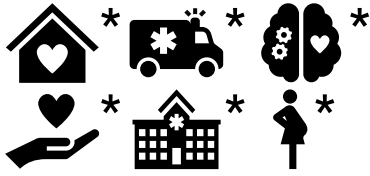
*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)



*Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation
Services, Medically-Supportive
Food/Meals/Medically
Tailored Meals
Street Medicine Provider: N
Phone for Existing Patients:
(858) 637-3221*

JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE
SAN DIEGO, CA 92123
 Phone: (858) 637-3221
 After Hours Phone: (858)
637-3221
 Accessibility: CONTACT
PROVIDER
 Website: N/A
ECM Population of Focus:

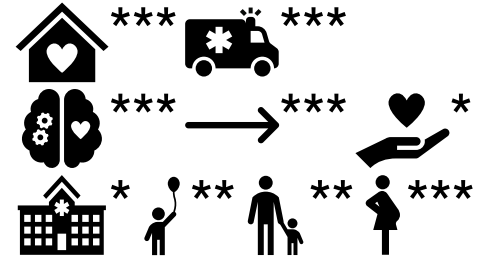


*Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation
Services, Medically-Supportive
Food/Meals/Medically
Tailored Meals
Street Medicine Provider: N
Phone for Existing Patients:
(858) 637-3221*

LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 510-4641
 After Hours Phone: (619)
510-4641
 Accessibility: CONTACT
PROVIDER
 Website: N/A

ECM Population of Focus:



*Community Supports Services:
Asthma Remediation, Housing
Deposits, Housing Tenancy and
Sustaining Services, Housing
Transition Navigation Services
Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs*

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM† والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

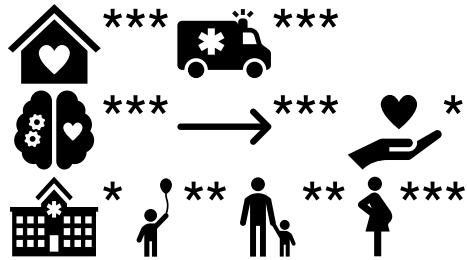
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LA MAESTRA COMMUNITY HEALTH CENTERS

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
Asthma Remediation, Housing
Deposits, Housing Tenancy and
Sustaining Services, Housing
Transition Navigation Services
Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

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4074 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)

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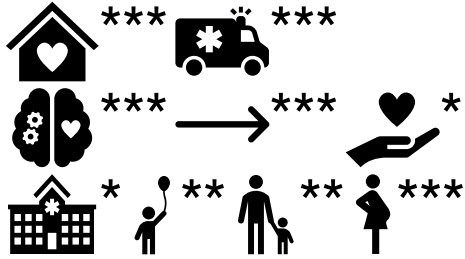
K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

510-4641

 Accessibility: CONTACT PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A


Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

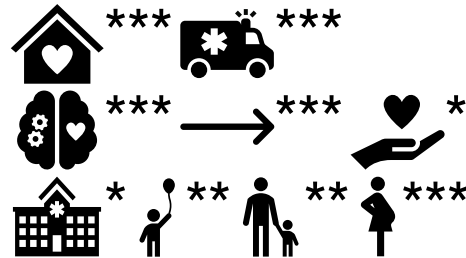
LA MAESTRA COMMUNITY HEALTH CENTERS

 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 510-4641
 After Hours Phone: (619)
510-4641

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A




Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities; JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

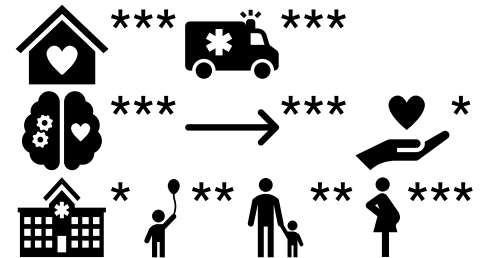
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SAN DIEGO, CA 92105
 Phone: (619) 510-4641
 After Hours Phone: (619)
510-4641

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



*الكبار **الأطفال ***الكبار والأطفال على حد سواء

ECM† والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Community Supports Services:

N/A

Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641

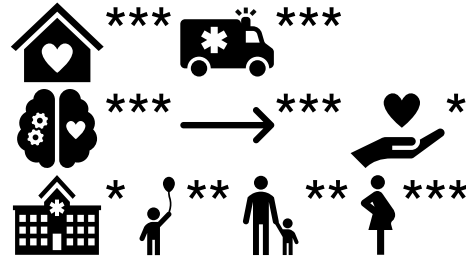
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services:

N/A

Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

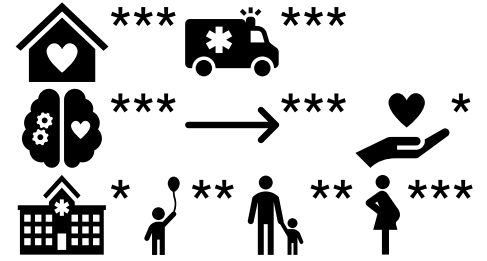
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH

CENTERS

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider

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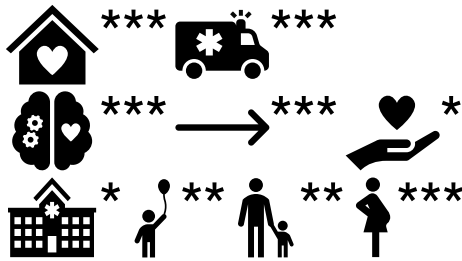
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:

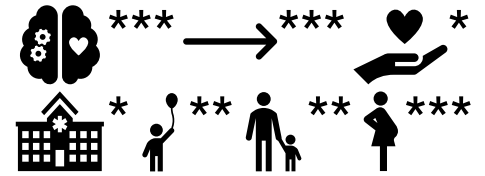


Community Supports Services:
N/A
Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619)
510-4641
Accessibility: CONTACT
PROVIDER
Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A
Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105







*الكبار **الأطفال ***الكبار والأطفال على حد سواء

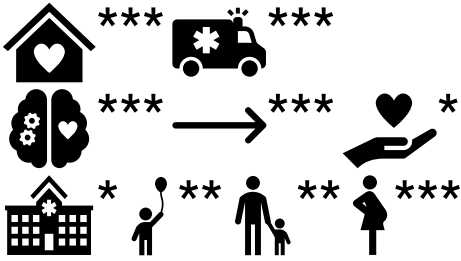
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

 Phone: (619) 510-4641
 After Hours Phone: (619) 510-4641
 Site Languages(s) Spoken: Spanish
 Hours: M-F 8AM-5PM
 Accessibility: CONTACT PROVIDER
 Website: N/A
ECM Population of Focus:



Community Supports Services:
N/A







Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641

Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105

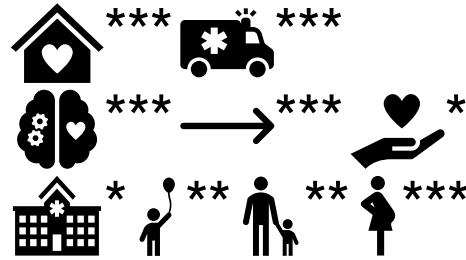
Jl ECM Provider Billing- Direct
Contract with Correctional
Facilities; Jl ECM Provider
Billing- FFS (PAVE Enrollment)

Jl ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 510-4641
 After Hours Phone: (619) 510-4641
 Site Languages(s) Spoken: Spanish
 Hours: M-F 8AM-5PM
 Accessibility: CONTACT PROVIDER
 Website: N/A




ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105
Jl ECM Provider Billing- Direct
Contract with Correctional
Facilities; Jl ECM Provider
Billing- FFS (PAVE Enrollment)
Jl ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

SERENE HEALTH

 4849 RONSON CT STE 207
SAN DIEGO, CA 92111
 Phone: (844) 737-3638
 After Hours Phone: (844) 737-3638
 Hours: M-F 8:30AM-5PM
 Accessibility: CONTACT PROVIDER
 Website: N/A

ECM Population of Focus:



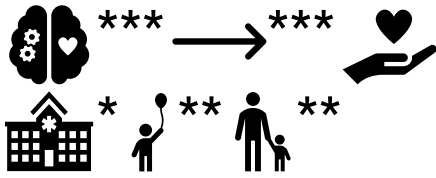
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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)



Community Supports Services:
 Housing Deposits, Housing
 Tenancy and Sustaining
 Services, Housing Transition
 Navigation
 Services, Short-Term
 Post-Hospitalization Housing
 Street Medicine Provider: N
 Phone for Existing Patients:
 (844) 737-3638
 Mailing Address: 4849
 RONSON CT STE 207; SAN
 DIEGO; CA; 92111
 JI ECM Provider Billing- FFS
 (PAVE Enrollment)
 JI ECM Provider
 Services-Pre-Release Services
 and Participating in Warm
 Handoffs; JI ECM Provider
 Services-Warm Handoffs Only

IMPERIAL BEACH HEALTH

CENTER

1016 OUTER RD
 SAN DIEGO, CA 92154
 Phone: (619) 429-3733
 After Hours Phone: (619)
 429-3733

Accessibility: CONTACT
 PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
 N/A

Street Medicine Provider: N
 Phone for Existing Patients:
 (619) 429-3733

HEALTHY CONNECT SAN DIEGO

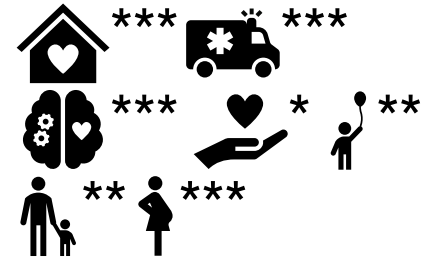
1202 MORENA BLVD
 SAN DIEGO, CA 92110
 Phone: (619) 507-9333
 After Hours Phone: (619)

507-9333

Hours: M-F 8AM-4PM
 Accessibility: CONTACT
 PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:
 Housing Deposits, Housing
 Tenancy and Sustaining
 Services, Housing Transition
 Navigation Services

Street Medicine Provider: N
 Phone for Existing Patients:
 (619) 507-9333

HEALTHY CONNECT SAN DIEGO

3570 CAMINO DEL RIO N
 SAN DIEGO, CA 92108
 Phone: (619) 507-9333
 After Hours Phone: (619)

*الكبار **الأطفال ***الكبار والأطفال على حد سواء


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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

507-9333

 Accessibility: CONTACT PROVIDER

 Website: N/A

ECM Population of Focus:





Community Supports Services:
N/A

Street Medicine Provider: N
Phone for Existing Patients:
(619) 507-9333

HEALTHY CONNECT SAN DIEGO

 3570 CAMINO DEL RIO N
SAN DIEGO, CA 92108

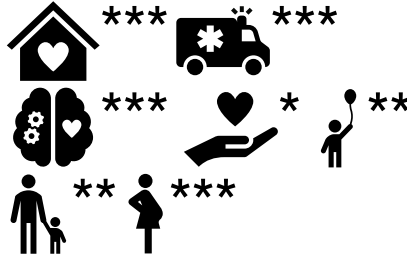
 Phone: (619) 507-9333

 After Hours Phone: (619)
507-9333

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:




Community Supports Services:
N/A


Street Medicine Provider: N
Phone for Existing Patients:
(619) 507-9333


FAMILY HEALTH

CENTERS OF SAN DIEGO


 823 GATEWAY CENTER
WAY

SAN DIEGO, CA 92102

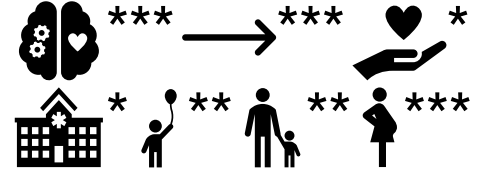
 Phone: (619) 876-4450

 After Hours Phone: (619)
876-4450

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation Services
Street Medicine Provider: N
Phone for Existing Patients:
(619) 876-4450

Mailing Address: 823

GATEWAY CENTER WAY; SAN
DIEGO; CA; 92102

Jl ECM Provider Billing- FFS
(PAVE Enrollment)

Jl ECM Provider

Services-Pre-Release Services
and Participating in Warm
Handoffs; Jl ECM Provider
Services-Warm Handoffs Only

FAMILY HEALTH

CENTERS OF SAN DIEGO

 823 GATEWAY CENTER

*الكبار **الأطفال ***الكبار والأطفال على حد سواء

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

WAY

SAN DIEGO, CA 92102

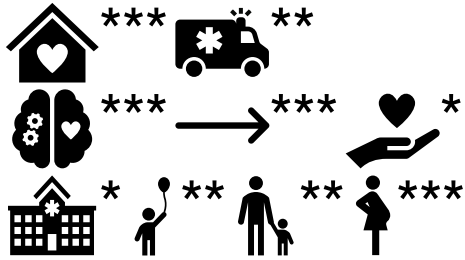
Phone: (619) 876-4450

After Hours Phone: (619) 876-4450

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:

Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services

Street Medicine Provider: N

Phone for Existing Patients:

(619) 876-4450

Mailing Address: 823 GATEWAY CENTER WAY; SAN DIEGO; CA; 92102

JI ECM Provider Billing- FFS

(PAVE Enrollment)

JI ECM Provider

Services-Pre-Release Services and Participating in Warm Handoffs; JI ECM Provider Services-Warm Handoffs Only

HEALTHY CONNECT SAN DIEGO

1202 MORENA BLVD SAN DIEGO, CA 92110

Phone: (619) 507-9333

After Hours Phone: (619) 507-9333

Hours: M-F 8AM-4PM

Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:

Housing Deposits, Housing

Tenancy and Sustaining Services, Housing Transition Navigation Services
Street Medicine Provider: N
Phone for Existing Patients: (619) 507-9333

2-1-1 SAN DIEGO

3860 CALLE FORTUNADA SAN DIEGO, CA 92123

Phone: (818) 370-8184

After Hours Phone: (818) 370-8184

Accessibility: CONTACT PROVIDER

Website: N/A

Community Supports Services: Housing Tenancy and Sustaining Services, Housing Transition Navigation Services
Street Medicine Provider: N
Phone for Existing Patients: (818) 370-8184

2-1-1 SAN DIEGO

3860 CALLE FORTUNADA SAN DIEGO, CA 92123

Phone: (818) 370-8184

After Hours Phone: (818)

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

370-8184


 Accessibility: CONTACT PROVIDER


 Website: N/A


Community Supports Services:
Housing Tenancy and
Sustaining Services, Housing
Transition Navigation Services
Street Medicine Provider: N
Phone for Existing Patients:
(818) 370-8184


SERENE HEALTH

 4849 RONSON CT STE 207
SAN DIEGO, CA 92111

 Phone: (844) 737-3638

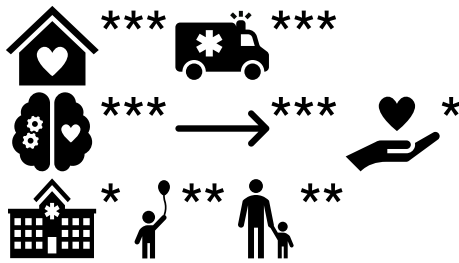
 After Hours Phone: (844)
737-3638

 Hours: M-F 8:30AM-5PM

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:

Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation
Services, Short-Term
Post-Hospitalization Housing
Street Medicine Provider: N
Phone for Existing Patients:
(844) 737-3638

Mailing Address: 4849

RONSON CT STE 207; SAN
DIEGO; CA; 92111

Jl ECM Provider Billing- FFS
(PAVE Enrollment)

Jl ECM Provider


Services-Pre-Release Services
and Participating in Warm
Handoffs; Jl ECM Provider
Services-Warm Handoffs Only

SAN MARCOS

MERAKEY ALLOS

 334 VIA VERA CRUZ STE
204


SAN MARCOS, CA 92078

 Phone: (916) 832-4868

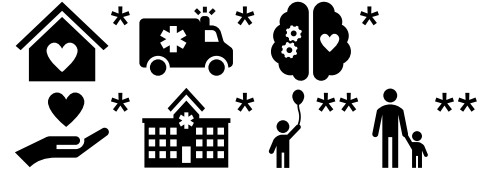
 After Hours Phone: (916)

832-4868

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ECM Population of Focus:



Community Supports Services:
N/A

Street Medicine Provider: N


Phone for Existing Patients:
(916) 832-4868


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

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K. مقدمو الخدمات الآخرون (الدعم المجتمعي، إدارة الرعاية المحسنة)

hc.com

Cultural Competency: N

Accepting New Patients: No

ECM Population of Focus:



Community Supports Services:

N/A

Street Medicine Provider: N

Phone for Existing Patients:

(760) 631-5000

Community Supports Services:

N/A

Street Medicine Provider: N

Phone for Existing Patients:

(760) 682-2424

VISTA

VISTA COMMUNITY

CLINIC

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Accessibility: CONTACT
PROVIDER

Website: N/A

ECM Population of Focus:



*الكبار**الأطفال***الكبار والأطفال على حد سواء

ECM† والدعم المجتمعي يتطلبان تصريحاً مسبقاً ويقتصران على الأعضاء الذين يستوفون معايير أهلية محددة.

طب الشارع، أو صحة الشارع، هو ممارسة تقديم الرعاية الصحية للأشخاص الذين يعانون التشرذ غير المحمي

اتصل بخدمة عملاء Blue Shield Promise على الرقم 1-800-605-2556 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحاً حتى 6:00 مساءً TTY/TDD: 711. يمكنك الزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدمي الخدمات هذا عرضة للتغيير.

L. مرافق الرعاية العاجلة لدى Blue Shield Promise

CHULA VISTA

AFC URGENT CARE OF BONITA

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Spanish

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

Accessibility: CONTACT PROVIDER

www.afcurgentcare.com/chula-vista/

Accepting New Patients: No

<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 8AM-8PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

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 8AM-8PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO

NPI: 1952995466

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8AM-8PM

Accessibility: CONTACT PROVIDER

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

SU-SA 8AM-8PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

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 8AM-8PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

اتصل برعاية عملاء Blue Shield Promise على الرقم 1-855-699-5557 للحصول على أحدث المعلومات، من الاثنين إلى الجمعة، من الساعة 8:00 صباحًا حتى 6:00 مساءً 711 TTY/TDD. تفضل بالزيارة عبر الإنترنت على blueshieldca.com/promise/medi-cal. المعلومات الواردة في دليل مقدم الخدمة هذا عرضة للتغيير.

L. مرافق الرعاية العاجلة لدى Blue Shield Promise

.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 8AM-8PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san- diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1558788620

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8AM-8PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.com/san- diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1952995466

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8AM-8PM

Accessibility: CONTACT
PROVIDER

<https://www.afcurgentcare.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

Arabic, Spanish

SU-SA 8AM-8PM

Accessibility: CONTACT
PROVIDER

www.afcurgentcare.com/s

antee/
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

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ل. مرافق الرعاية العاجلة لدى Blue Shield Promise

 (858) 966-8133
 (858) 966-8133
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNFTN






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CHULA VISTA, CA 91910
 (858) 966-8133
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 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

ESCONDIDO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNFTN

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Blue Shield Promise مرافق الرعاية العاجلة لدى .L

NPI: 1669617197

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

(760) 755-7600

(760) 755-7600

M-F 8AM-5PM

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN

NPI: 1669617197

2125 CITRACADO PKWY
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ESCONDIDO, CA 92029

(760) 755-7600

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M-F 8AM-5PM

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Blue Shield Promise لى الرعاية العاجلة لى .L

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Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDRN

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ESCONDIDO, CA 92029

(760) 755-7600

(760) 755-7600

M-F 8AM-5PM

Accessibility: CONTACT
PROVIDER

N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDRN

NPI:1669617197

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

(760) 755-7600

(760) 755-7600

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Accessibility: CONTACT
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Blue Shield Promise لى مرافق الرعاية العاجلة لى .L

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PROVIDER

N/A

Accepting New Patients: No

LA MESA

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNFTN

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

SPECIALISTS SAN DIEGO MED

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Blue Shield Promise لى مرافق الرعاية العاجلة لى .L

FNDTN

NPI: 1669617197

5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

(619) 713-5375

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Accessibility: CONTACT
PROVIDER

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Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

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NPI: 1669617197


5565 GROSSMONT




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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

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
FNFTN**
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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FNFTN**
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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Accepting New Patients: No

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 *Accessibility:* CONTACT PROVIDER
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Accepting New Patients: No

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Blue Shield Promise لدى مرافق الرعاية العاجلة لدى L.


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Accepting New Patients: No

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NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

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 *Accessibility:* CONTACT PROVIDER


 N/A


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ل. مرافق الرعاية العاجلة لدى Blue Shield Promise


SPECIALISTS SAN DIEGO MED

FNDTN

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER

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Accepting New Patients: No


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
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (858) 576-1700

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 *Accessibility:* CONTACT
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 N/A


Accepting New Patients: No


RADY CHILDRENS


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Blue Shield Promise لدى مرافق الرعاية العاجلة لدى L.

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (858) 576-1700
 (858) 576-1700
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN





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Blue Shield Promise لى مرافق الرعاية العاجلة لى .L


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Accepting New Patients: No



RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNFTN



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ل. مرافق الرعاية العاجلة لدى Blue Shield Promise

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

SPECIALISTS SAN DIEGO MED

FNDTN

NPI: 1669617197

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5565 GROSSMONT
CENTER DR STE 2

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L. مرافق الرعاية العاجلة لدى Blue Shield Promise





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
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
CENTER DR STE 2
LA MESA, CA 91942



 (858) 576-1700
 (858) 576-1700
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Accepting New Patients: No


OCEANSIDE


RADY CHILDRENS

**SPECIALISTS SAN DIEGO MED
FN D TN**

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

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 (760) 547-1020

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 N/A


Accepting New Patients: No


SAN DIEGO


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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 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

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ل. مرافق الرعاية العاجلة لدى Blue Shield Promise

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Blue Shield Promise لى مرافق الرعاية العاجلة لى .L

FNDTN

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4305 UNIVERSITY AVE STE
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SAN DIEGO, CA 92105

(619) 280-2905

(619) 280-2905

Accessibility: CONTACT
PROVIDER

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 1PM-10PM
M-F 4PM-10PM

SA 1PM-10PM

Accessibility: CONTACT
PROVIDER

N/A

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

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

Accessibility: CONTACT
PROVIDER

N/A

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 1PM-10PM
M-F 4PM-10PM
SA 1PM-10PM

Accessibility: CONTACT
PROVIDER

N/A

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

Spanish, Vietnamese

SU 10AM-6PM
M-F 9AM-8PM
SA 10AM-6PM

Accessibility: CONTACT
PROVIDER

<https://www.southbayurge>

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L. مرافق الرعاية العاجلة لدى Blue Shield Promise

ntcare.com/
Accepting New Patients: No

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BAJWA, MANDEEP.....	560	BECERRA SONGOLO, TOSHA.795,		BINETTE, DONYA.....	593, 1008
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