



Medi-Cal

Condado de San Diego | June 2024



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) Ուժեղ 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:

ប្រាសាទភាសាខ្មែរ (Cambodian) ចំណាំ: បើសិនអ្នកត្រូវការជំនួយ ជាភាសារបស់អ្នក សូមទូរស័ព្ទទៅលេខ 1-855-699-5557 (TTY: 711) ។ ជំនួយ និងសេវា សំរាប់ជនពិការ ដូចជាឯកសារសរសេរជាអក្សរព្រីល សំរាប់ជនពិការភ្នែក ឬឯកសារជាអក្សរព្រុំធំៗ 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 ເຊັ່ນເອກະສານທີ່ເປັນອັກສອນນູນແລະມີໂຕພິມໃຫຍ່ ໃຫ້ໂທຫາເບີ 1-855-699-5557 (TTY: 711). ການບໍລິການເຫຼົ່ານີ້ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍໃດໆ.

Mienh Tagline (Mien) LONGC HNYOUV JANGX LONGX OC: Beiv taux meih qiex 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) | ਆਹਜ 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.

Índice

A. Introducción	6
Aviso de no discriminación	9
Cómo presentar una queja.....	10
Red de proveedores de Blue Shield Promise.....	12
Indicadores de accesibilidad física en el Directorio de Proveedores.....	13
Explicaciones de los códigos de accesibilidad.....	14
Cómo leer las listas de proveedores.....	15
Reglas para recibir atención a tiempo	16
B. Clínicas de salud con calificación federal	19
C. Directorio de atención primaria	310
D. Directorio de proveedores especialistas	664
E. Directorio de hospitales: hospital general de atención aguda	1434
F. Atención a largo plazo (LTC) y centros de enfermería especializada (SNF)	1439
G. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos	1456
H. Servicios de apoyo en el hogar (IHSS) del condado	1459
I. Directorio de salud mental	1460
J. Directorio de proveedores de la vista: servicios oculares y de la vista	1545
K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)	1665
L. Centros de atención de urgencia de Blue Shield Promise	1681
M. Índice de atención primaria.....	1717

A. Introducción

Gracias por elegir Blue Shield of California Promise Health Plan. Este Directorio de Proveedores incluye una lista de las clínicas, los médicos, los hospitales, las farmacias y otros tipos de proveedores que forman parte de Blue Shield Promise Health Plan.

Cuando se inscribe en Blue Shield of California Promise Health Plan, es importante que elija un médico de atención primaria (PCP, por sus siglas en inglés) para cada miembro. Si no elige un PCP, Blue Shield Promise elegirá uno por usted. Su PCP es el médico con el que usted se atenderá cuando necesite atención preventiva y cuando se enferme. Cuando sea necesario, su PCP le dirá que vaya a un médico especialista o a otro proveedor que tenga una especialidad. El PCP atiende sus necesidades de atención de la salud y trabaja con los miembros para ayudarlos a mantenerse saludables.

Cómo cambiar de PCP

Usted puede cambiar de PCP en cualquier momento; para hacerlo, llame a Atención al Cliente de Blue Shield Promise al **(855) 699-5557** [TTY: **711**]. Los cambios se aplicarán el primer día del próximo mes. También puede visitar nuestro sitio web en blueshieldca.com/promise.

Como miembro de Blue Shield of California Promise Health Plan, recibirá una tarjeta de identificación de miembro como la que aparece en esta página. Deberá mostrar su tarjeta de identificación cada vez que vaya al médico, obtenga sus medicamentos

recetados, use la sala de emergencias o vaya al oculista. Tenga siempre esta tarjeta con usted. Cuando reciba su tarjeta de identificación, asegúrese de que los datos sean correctos. Si no lo son, llame a Atención al Cliente de Blue Shield of California Promise Health Plan al **(855) 699-5557**.

Guarde su tarjeta de Medi-Cal (BIC); la necesitará cuando vaya a su dentista de Medi-Cal y para obtener otros servicios de atención de la salud que Blue Shield of California Promise Health Plan no cubre.

 Member: JOHN DOE Member ID: AAA123456789 CIN: 123456789 Health Plan Group #: E0001001 Effective Date: MM/DD/YYYY	Information Information Line 2 Information Line 2 PCP Name Phone Number 1234 Street City, ST Zip	www.blueshieldca.com/promise Customer Care (855) 699-5557 (TTY: 711) Provider Services (800) 468-9935 Transportation (800) 433-2178 Nurse Help Line (800) 609-4166 Behavioral Health (855) 321-2211 (TTY: 711) <small>This member has limited benefits outside of the plan service area and outside of California. Promise Health Plan is for individuals who reside in California and are eligible for services. Blue Shield of California Promise Health Plan is not available in all states. Please see all states with our local 3025 license or visit our website for more information. CA Promise Call Center: 1-800-468-9935. For more information, please contact your agent or call 1-800-468-9935. Blue Shield of California Promise Health Plan is available to U.S. RESIDENTS who provide the appropriate information by contract and are not subject to state law. If the member is in need of EMERGENCY care please call the care and crisis line at 1-800-468-9935. Blue Shield of California Promise Health Plan is not available. All services are subject to the medical necessity, coordination and the services required to obtain the condition require pre-authorization approval. Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association.</small>
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Tarjeta de Identificación de Blue Shield (BIC)

Servicios de farmacia a través de Medi-Cal Rx

El Departamento de Servicios de Atención Médica (DHCS) administra los servicios de farmacia para los miembros de Medi-Cal. Para servicios de farmacia, puede llamar a Medi-Cal Rx Call Línea central (1-800-977-2273) veinticuatro horas al día, siete días a la semana o 711 para TTY, de lunes a viernes, de 8 a.m. a 5 p.m.) La mayoría de las farmacias aceptan Medi-Cal Rx. Puede

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

comunicarse con la Línea de ayuda para miembros de Medi-Cal (1-800-541-5555, TTY 1-800-430-7077) para preguntar si su farmacia aceptará Medi-Cal Rx. Si necesita ayuda para encontrar una farmacia, use el localizador de farmacias de Medi-Cal Rx en línea en www.Medi-CalRx.dhcs.ca.gov o llame a la línea del centro de llamadas de Medi-Cal Rx al 1-800-977-2273.

Cómo usar este Directorio

Puede usar este Directorio de Proveedores para elegir un PCP contratado de Blue Shield Promise. Los PCP y los especialistas, hospitales y otros proveedores de servicios de apoyo están ordenados alfabéticamente por ciudad. En la sección "Red de proveedores de Blue Shield Promise", encontrará información sobre cómo leer las secciones de listas de proveedores y buscar la información importante que necesite sobre cada proveedor.

Información importante sobre las listas del Directorio

Este Directorio de Proveedores está actualizado a la fecha que aparece en la portada. Es posible que se hayan agregado o quitado PCP después de la impresión de este Directorio. No garantizamos que todos los PCP aún acepten miembros nuevos. Para obtener la información más actualizada sobre los PCP en su área, puede visitar blueshieldca.com/promise o llamar gratis a Atención al Cliente de Blue Shield Promise al **(855) 699-5557** [TTY: **711**]. O visite nuestra

oficina de lunes a viernes, de 8:00 a. m. a 6:00 p. m. No es necesario tener una cita previa. Nuestro personal cuenta con miembros que hablan su idioma. También puede visitar nuestro sitio web en blueshieldca.com/promise.

Divulgaciones y otra información importante
Algunos proveedores y hospitales no ofrecen uno o más de los siguientes servicios que quizá estén cubiertos por su plan de salud y que usted podría necesitar: planificación familiar; servicios de anticoncepción, incluida la anticoncepción de emergencia; esterilización, incluida la ligadura de trompas inmediatamente después del parto; tratamientos por esterilidad; o aborto, entre otros. Comuníquese con Atención al Cliente de Blue Shield Promise al **(855) 699-5557** para asegurarse de que puede obtener los servicios de atención de la salud que necesita.

Para obtener más información sobre nuestros proveedores, incluida la información sobre sus estudios académicos y su experiencia (por ejemplo, la facultad de medicina a la que fueron, las residencias que hicieron y la matrícula profesional que tienen), llame a Atención al Cliente de Blue Shield Promise o use la herramienta de búsqueda de proveedores disponible en nuestro sitio web en blueshieldca.com/promise. Es posible que necesite autorizaciones o referencias para tener acceso a algunos proveedores. Blue Shield Promise brinda acceso completo e igualitario a los servicios cubiertos, incluso

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

para los inscritos que tienen alguna discapacidad. Todos los proveedores reciben y deben hacer un entrenamiento en competencia cultural.

Servicios de intérpretes

Para facilitarle las cosas, Blue Shield Promise brinda los siguientes servicios:

- Personal **bilingüe** para brindarle ayuda en su idioma.
- **Servicios de intérpretes**, incluso en lenguaje de señas estadounidense, para todas sus necesidades de atención de la salud, sin costo para usted. No tiene que pedirles a sus amigos o familiares que hagan de intérpretes. Usted puede obtener servicios de intérpretes las 24 horas, cualquier día de la semana, para lo siguiente:
 - ✓ **Servicios médicos:** visitas al médico, servicios fuera del horario de atención, servicios de atención urgente, servicios de farmacias y clases de educación sobre la salud.
 - ✓ **Servicios no médicos:** servicio al cliente, quejas de los miembros y reuniones informativas para miembros.
 - ✓ **Materiales en otros formatos**, como braille, audio o letra grande.

Solo debe llamar a su grupo médico o a Atención al Cliente de Blue Shield Promise. Si ya hizo una cita, asegúrese de pedir un intérprete al menos diez (10) días hábiles antes de su cita.

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

AVISO DE NO DISCRIMINACIÓN

La discriminación va contra la ley. Blue Shield of California Promise Health Plan cumple con las leyes federales y estatales de derechos civiles. Blue Shield of California Promise Health Plan no discrimina de manera ilícita, no excluye personas o las trata de manera diferente debido a su sexo, raza, color, religión, ascendencia, nacionalidad, identificación con un grupo étnico, edad, discapacidad mental, discapacidad física, condición médica, información genética, estado civil, género, identidad de género u orientación sexual.

Blue Shield of California Promise Health Plan proporciona:

- Asistencia y servicios gratuitos a las personas con discapacidades para ayudarlas a que se comuniquen mejor, como por ejemplo:
 - ✓ Intérpretes de lenguaje de señas capacitados
 - ✓ Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos)
- Servicios lingüísticos gratuitos a personas cuya lengua materna no es el inglés, como por ejemplo:
 - ✓ Intérpretes capacitados
 - ✓ Información escrita en otros idiomas

Si necesita estos servicios, comuníquese con Blue Shield of California Promise Health Plan, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. Llame a Atención al Cliente en su región:

(800) 605-2556 (Los Angeles)

(855) 699-5557 (San Diego)

Si no puede oír o hablar bien, llame al **TTY: 711**. Si usted lo solicita, este documento puede estar disponible para usted en braille, letra grande, cinta de audio o formato electrónico. Para obtener una copia en uno de estos formatos alternativos, llame o escriba a:

Blue Shield of California Promise Health Plan Customer Care

3840 Kilroy Airport Way, Long Beach, CA 90806

(800) 605-2556 (Los Angeles)

(855) 699-5557 (San Diego)

TTY: 711

CÓMO PRESENTAR UNA QUEJA

Si usted cree que Blue Shield of California Promise Health Plan no ha brindado estos servicios o ha cometido una discriminación ilícita de alguna otra manera, por motivos de sexo, raza, color, religión, ascendencia, nacionalidad, identificación con un grupo étnico, edad, discapacidad mental, discapacidad física, condición médica, información genética, estado civil, género, identidad de género u orientación sexual, usted puede presentar una queja ante el Coordinador de Derechos Civiles de Blue Shield of California Promise Health Plan. Puede presentar una queja por teléfono, por escrito, personalmente o por vía electrónica:

- Por teléfono: Comuníquese con el Coordinador de Derechos Civiles de Blue Shield of California Promise Health Plan, de lunes a viernes, de 8:00 a.m. a 6:00 p.m., llamando al (844) 883-2233. Si usted no puede oír o hablar bien, llame a la línea TTY/TDD 711.
- Por escrito: Llene un formulario de queja o escriba una carta, y envíelo(a) a:
Blue Shield of California Promise Health Plan Civil Rights Coordinator
3840 Kilroy Airport Way, Long Beach, CA 90806
- En persona: Vaya al consultorio de su médico o a Blue Shield of California Promise Health Plan y diga que desea presentar una queja.
- Por vía electrónica: Visite el sitio web de Blue Shield of California Promise Health Plan www.blueshieldca.com/promise/medi-cal.

OFICINA DE DERECHOS CIVILES (OFFICE OF CIVIL RIGHTS) – DEPARTAMENTO DE SERVICIOS DE ATENCIÓN MÉDICA DE CALIFORNIA (CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES)

También puede presentar una queja de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Servicios de Atención Médica de California. Puede hacerlo por teléfono, por escrito o por vía electrónica:

- Por teléfono: Llame al **916-440-7370**. Si no puede hablar u oír bien, llame al **711 (Servicio de Retransmisión de Telecomunicaciones)**.
- Por escrito: Llene un formulario de queja o envíe una carta a:
Deputy Director, Office of Civil Rights
Department of Health Care Services
P.O. Box 997413, MS 0009 Sacramento, CA 95899-7413

Los formularios de queja están disponibles en http://www.dhcs.ca.gov/Pages/Language_Access.aspx.
- Por vía electrónica: Envíe un correo electrónico a CivilRights@dhcs.ca.gov.

OFICINA DE DERECHOS CIVILES – DEPARTAMENTO DE SALUD Y SERVICIOS HUMANOS DE LOS ESTADOS UNIDOS (U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES)

Si usted cree que ha sido discriminado por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, también puede presentar una queja de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de los Estados Unidos por teléfono, por escrito o por vía electrónica:

- Por teléfono: Llame al **1-800-368-1019**. Si usted no puede hablar u oír bien, llame al **TTY/TDD 1-800-537-7697**.
- Por escrito: Llene un formulario de queja o envíe una carta a:
U.S. Department of Health and Human Services
200 Independence Avenue, SW Room 509F, HHH Building
Washington, D.C. 20201

Los formularios de queja están disponibles en <http://www.hhs.gov/ocr/office/file/index.html>.
- Por vía electrónica: Visite el Portal de Quejas de la Oficina de Derechos Civiles en <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

Red De Proveedores De Blue Shield Promise

Definiciones e información general

Clínica comunitaria: Es una clínica sin fines de lucro que brinda servicios de atención de la salud a los miembros de Blue Shield Promise.

Médicos familiares y generales: Son médicos que brindan atención a niños y adultos.

Centro de salud federalmente calificado (FQHC, por sus siglas en inglés): Es una organización comunitaria que brinda atención primaria y preventiva a personas de todas las edades, in importar si pueden pagar o si tienen un seguro de salud.

Hospital: Blue Shield Promise tiene un contrato con muchos hospitales. Compruebe que el hospital del médico de atención primaria que desea elegir esté afiliado.

Médicos de medicina interna: Son médicos que brindan atención a personas adultas mayores de 18 años.

Asociación de Práctica Independiente (IPA, por

sus siglas en inglés): Es un modelo de atención de la salud que tiene un contrato con un grupo de médicos para que brinden servicios de atención de la salud.

Grupo médico: Es un grupo de médicos que brindan servicios de atención de la salud a los miembros de Blue Shield Promise.









Obstetras y ginecólogos: Son médicos especializados en atención de la salud para la mujer y en atención por maternidad.

Pediatras: Son médicos que brindan atención a niños de hasta 18 años.

Médico de atención primaria (PCP): Como miembro de Blue Shield Promise, usted debe elegir un PCP para que se ocupe de sus necesidades generales de atención de la salud. Si no elige un PCP, elegiremos uno por usted. Todos los PCP están ordenados por ciudad. Usted puede elegir

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). La información en este directorio de proveedores está sujeta a cambios.

Símbolos Usados En El Directorio De Proveedores

-  El proveedor no acepta pacientes nuevos en esta red de salud.
-  Dirección del proveedor
-  Número de teléfono del proveedor
-  Número de teléfono del proveedor para llamadas fuera del horario de atención
-  Idiomas que se hablan en el consultorio de este proveedor
-  Horario de atención del proveedor
-  Información sobre accesibilidad
-  Sitio web del proveedor

cualquiera de los siguientes tipos de médicos:

- Médicos familiares y generales
- Médicos de medicina interna
- Obstetras y ginecólogos
- Pediatras

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). La información en este directorio de proveedores está sujeta a cambios.

Indicadores De Accesibilidad Física En El Directorio De Proveedores

A continuación, encontrará información sobre las necesidades básicas de acceso para adultos mayores y personas con discapacidad (SPD, por sus siglas en inglés) cuando visita el consultorio del médico. Sabemos que los miembros pueden tener distintas necesidades. Por eso, les pedimos que llamen al consultorio del médico para hablar sobre sus necesidades de acceso.

E = Sala de exámenes

La entrada a la sala de exámenes es accesible y no tiene obstáculos. Las puertas son amplias y fáciles de abrir, para permitir el acceso de una silla de ruedas o un scooter. La sala de exámenes tiene espacio suficiente para una silla de ruedas o un scooter.

EB = Instalaciones externas

Las rampas en el cordón de la acera y las otras rampas del edificio son anchas y permiten el acceso de personas en silla de ruedas o scooter. Hay pasamanos en ambos lados de la rampa. El edificio tiene una entrada "accesible". Las puertas son amplias para permitir el ingreso de personas en silla de ruedas o scooter, y tienen picaportes fáciles de usar.

IB = Instalaciones internas

Las puertas son amplias para permitir el ingreso de personas en silla de ruedas o scooter, y tienen picaportes fáciles de usar. Las rampas internas son anchas y tienen pasamanos. Las escaleras, si las hay, tienen pasamanos.

Si hay elevadores, están disponibles para los pacientes y el público en general durante todo el tiempo que está abierto el edificio. Además, tienen sonidos fáciles de oír y botones en braille al alcance de la mano, como también espacio suficiente para que las personas en silla de ruedas o scooter puedan girar. Si hay una

plataforma elevadora, es posible usarla sin necesidad de obtener ayuda.

P = Estacionamiento

Los espacios para estacionar, incluidos los espacios para camionetas, son accesibles. Los caminos y las entradas que conectan el estacionamiento, el consultorio y los puntos para dejar y recoger personas tienen rampas en los cordones.

R = Baño

El baño es accesible, y las puertas son amplias y fáciles de abrir para permitir el acceso de una silla de ruedas o un scooter. Además, el baño tiene espacio suficiente para que las personas en silla de ruedas o scooter puedan girar y cerrar la puerta. Hay barras de seguridad para que las personas puedan moverse de la silla de ruedas o el scooter al inodoro, y viceversa. El lavabo está en un lugar accesible, y los grifos, el jabón y el papel higiénico están al alcance de la mano.

T = Camilla y balanza

La camilla tiene un mecanismo que permite elevarla o bajarla, y la balanza es accesible y tiene pasamanos que sirven de ayuda a las personas en silla de ruedas o scooter. La balanza tiene espacio para silla de ruedas.

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). La información en este directorio de proveedores está sujeta a cambios.



Explicaciones de los Códigos de Accesibilidad

CÓDIGO	Explicación
P	Estacionamiento
EB	Instalaciones externas
IB	Instalaciones internas
W	Silla de ruedas
R	Baño
E	Sala de exámenes
T	Camilla y balanza

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en [blueshieldca.com/promise/medi-cal](https://www.blueshieldca.com/promise/medi-cal). La información en este directorio de proveedores está sujeta a cambios.

Cómo Leer las Listas de Proveedores

La siguiente información puede ayudarlo a elegir su PCP.

1. Especialidad médica del proveedor
2. Nombre del proveedor
3. N.º de id. del proveedor
4. Sexo del proveedor
5. Número de licencia del proveedor
6. Número de identificación de proveedor nacional (NPI, por sus siglas en inglés) del proveedor
7. Idiomas que hablan el proveedor y el personal
8. Entrenamiento en competencia cultural
9. Hospitales afiliados
10. Especialidad según matrícula profesional:
11. Nombre del FQHC/grupo médico
12. Dirección del proveedor
13. Número de teléfono del proveedor
14. N.º de fax del proveedor
15. Sitio web del proveedor
16. Dirección de correo electrónico del proveedor
17. Panel abierto de Medi-Cal:
18. Edad mín./máx.:
19. Acceso al edificio para personas con discapacidad
20. Horario de atención del proveedor

Ejemplo:

1. Pediatría
2. Doe, Jane, Doctor en Medicina (MD)
3. N.º de id. del proveedor: 00A2123456
4. Mujer
5. N.º de licencia: 00A123456
6. NPI: 0123456789
7. Inglés, español, vietnamita, farsi, coreano, chino, árabe
8. Sí
9. Good Samaritan Hospital
10. Pediatría
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. Sí/No
18. 0-18
19. Limitado. P, EB, IB, E
20. L a V, 8 A. M. - 5 P. M.

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

Reglas Para Recibir Atención A Tiempo

Tipo de cita	Debe tener la cita dentro de
Citas para recibir atención urgente que no necesitan autorización previa	48 horas
Citas para recibir atención urgente que sí necesitan autorización previa	96 horas
Citas que no son urgentes para recibir atención primaria	10 días hábiles
Citas que no son urgentes para recibir atención de especialistas	15 días hábiles
Citas que no son urgentes para recibir atención de un proveedor de la salud mental (personal no médico)	10 días hábiles
Citas que no son urgentes para recibir servicios auxiliares para el diagnóstico o el tratamiento de lesiones, enfermedades u otros problemas de salud	15 días hábiles
Tiempo de espera en el teléfono durante el horario de atención habitual	10 minutos
Triaje y servicios de atención las 24 horas, todos los días	Servicios de atención las 24 horas, todos los días; no más de 30 minutos

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

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


B. Clínicas de salud con calificación federal


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

CHULA VISTA

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal



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: 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): **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: 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): **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: 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): **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: 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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-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
 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: G74728

NPI: 1598122871

Accepting New Patients: Yes


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-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: 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 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: 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): **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: NP95015413


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: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p> <i>After Hours Phone:</i> 619-662-4100 <i>License Number:</i> PA54404 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None</p>	<p> <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 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> <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA  <i>Website:</i> www.ihpsocal.org</p>
<p> <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No  <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 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><i>American Sign Language (ASL):</i> N  <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA  <i>Website:</i> www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH CHULA VISTA <i>Provider ID:</i> 427322  678 3RD AVE CHULA VISTA, CA 91910-5736  <i>Phone:</i> 619-662-4100  <i>After Hours Phone:</i> 619-662-4100</p>
<p><i>American Sign Language (ASL):</i> N  <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA  <i>Website:</i> www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH CHULA VISTA <i>Provider ID:</i> 427322  678 3RD AVE CHULA VISTA, CA 91910-5736  <i>Phone:</i> 619-662-4100 <i>Fax:</i> 619-425-1184</p>	<p><i>License Number:</i> A47906 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None  <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No  <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 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 HEALTH CHULA VISTA <i>Provider ID:</i> 427322  678 3RD AVE CHULA VISTA, CA 91910-5736  <i>Phone:</i> 619-662-4100  <i>After Hours Phone:</i> 619-662-4100 <i>License Number:</i> SP18192 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None  <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No</p>	<p> <i>After Hours Phone:</i> 619-662-4100 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <i>Min/Max Age:</i> 0\None  <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No  <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM <i>American Sign Language (ASL):</i> N</p>	<p><i>American Sign Language (ASL):</i> N  <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA  <i>Website:</i> www.ihpsocal.org</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Min/Max Age: 0\None

Site English Spoken: Yes
Cultural Competency: No

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

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: 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):

N





Accessibility: CONTACT

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B. Clínicas de salud con calificación federal

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: 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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


SA 8:00AM-5:00PM
 American Sign Language (ASL): **FAMILY HLTH CTR SAN DIEGO-RICE FAM HC**


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

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
 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

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B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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
WE 9:00AM-5:00PM
TH 9:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

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


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B. Clínicas de salud con calificación federal

WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-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
 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: 20A9060
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p>	<p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH CHULA VISTA</p> <p><i>Provider ID: 427322</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A114893</i> <i>NPI: 1598122871</i></p>
<p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH CHULA VISTA</p> <p><i>Provider ID: 427322</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A114600</i> <i>NPI: 1598122871</i></p>	<p><i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p>
<p>SAN YSIDRO HEALTH CHULA VISTA</p> <p><i>Provider ID: 427322</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A106103</i> <i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p>	<p><i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p>	<p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p>	<p><i>American Sign Language (ASL):</i> N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH CHULA VISTA</p> <p><i>Provider ID: 427322</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910-5736</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone:</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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:
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






 *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

 *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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-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: 619-205-1360

 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): **OTAY FAMILY HEALTH CLINIC**

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: 619-205-1376

 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

 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
WE 9:00AM-5:00PM
TH 9:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 *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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


 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: 20A11535

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 *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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


 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
TH 9:00AM-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

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B. Clínicas de salud con calificación federal

 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: 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

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B. Clínicas de salud con calificación federal


 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
WE 9:00AM-5:00PM
TH 9:00AM-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

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B. Clínicas de salud con calificación federal

 *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: 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

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B. Clínicas de salud con calificación federal

 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
WE 9:00AM-5:00PM
TH 9:00AM-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


EL CAJON

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

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B. Clínicas de salud con calificación federal

 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

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

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B. Clínicas de salud con calificación federal

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

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

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

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




























Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

FR 8:00AM-8:00PM SA 8:00AM-8:00PM	 Website: N/A	NPI: 1134144165
American Sign Language (ASL): N	CENTRO MEDICO EL CAJON Provider ID: 478971	Accepting New Patients: Yes Min/Max Age: 0\None
 Accessibility: CONTACT PROVIDER	 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325	 Site English Spoken: Yes Cultural Competency: No
Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION	 Phone: 619-401-0404  After Hours Phone: 619-401-0404	 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
 Website: N/A	License Number: A98486 NPI: 1134144165	American Sign Language (ASL): N
CENTRO MEDICO EL CAJON Provider ID: 478971	Accepting New Patients: Yes Min/Max Age: 0\None	 Accessibility: CONTACT PROVIDER
 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325	 Site English Spoken: Yes Cultural Competency: No	Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION
 Phone: 619-401-0404  After Hours Phone: 619-401-0404	 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	 Website: N/A
License Number: A158569 NPI: 1134144165	American Sign Language (ASL): N	CENTRO MEDICO EL CAJON Provider ID: 478971
Accepting New Patients: Yes Min/Max Age: 0\None	 Accessibility: CONTACT PROVIDER	 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325
 Site English Spoken: Yes Cultural Competency: No	Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION	 Phone: 619-401-0404  After Hours Phone: 619-401-0404
 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	 Website: N/A	License Number: NP95001710 NPI: 1134144165
American Sign Language (ASL): N	CENTRO MEDICO EL CAJON Provider ID: 478971	Accepting New Patients: Yes Min/Max Age: 0\None
 Accessibility: CONTACT PROVIDER	 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325	 Site English Spoken: Yes Cultural Competency: No
Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION	 Phone: 619-401-0404  After Hours Phone: 619-401-0404	 Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM
	License Number: G52812	

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p>TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION</p> <p> Website: N/A</p>	<p>FOUNDTION</p> <p> Website: N/A</p> <p>CENTRO MEDICO EL CAJON</p> <p>Provider ID: 478971</p> <p> 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325</p> <p> Phone: 619-873-8940</p> <p> After Hours Phone: 619-873-8940</p> <p>License Number: A113241 NPI: 1134144165</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes Cultural Competency: No</p> <p> 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</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION</p> <p> Website: N/A</p>	<p> After Hours Phone: 619-515-2498</p> <p>License Number: 20A11535 NPI: 1134155377</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes Cultural Competency: No</p> <p> 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</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>CENTRO MEDICO EL CAJON</p> <p>Provider ID: 478971</p> <p> 133 W MAIN ST STE 100 EL CAJON, CA 92020-3325</p> <p> Phone: 619-873-8940</p> <p> After Hours Phone: 619-873-8940</p> <p>License Number: 20A11733 NPI: 1134144165</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes Cultural Competency: No</p> <p> 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</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: BORREGO COMMUNITY HEALTH</p>	<p>FAMILY HLTH CTR SAN DIEGO-EL CAJON</p> <p>Provider ID: 418340</p> <p> 525 E MAIN ST EL CAJON, CA 92020-4007</p> <p> Phone: 619-515-2498</p>	<p>FAMILY HLTH CTR SAN DIEGO-EL CAJON</p> <p>Provider ID: 418340</p> <p> 525 E MAIN ST EL CAJON, CA 92020-4007</p> <p> Phone: 619-515-2498</p> <p> After Hours Phone: 619-515-2498</p> <p>License Number: 20A13060 NPI: 1134155377</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes Cultural Competency: No</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

🕒 *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: 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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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
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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal



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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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 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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p>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</p>	<p><i>Cultural Competency: No</i>  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</p>	<p> Accessibility: CONTACT PROVIDER Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  Website: N/A</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  Website: N/A</p>	<p>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</p>	<p>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</p>
<p>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</p>	<p>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</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  Website: N/A</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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
FR 8:00AM-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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i>  <i>Website: N/A</i></p>	<p>SAN YSIDRO HEALTH EL CAJON <i>Provider ID: 569910</i>  875 EL CAJON BLVD EL CAJON, CA 92020-5714  <i>Phone: 619-662-4100</i>  <i>After Hours Phone: 619-662-4100</i></p>	<p><i>619-662-4100</i> <i>License Number: A120584</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p>
<p>SAN YSIDRO HEALTH EL CAJON <i>Provider ID: 569910</i>  875 EL CAJON BLVD EL CAJON, CA 92020-5714  <i>Phone: 619-662-4100</i>  <i>After Hours Phone: 619-662-4100</i> <i>License Number: A101773</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i>  <i>Site English Spoken: Yes</i>  <i>Site Languages(s) Spoken: Spanish, Tagalog</i> <i>Cultural Competency: No</i>  <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i> <i>American Sign Language (ASL):</i></p>	<p><i>License Number: A101888</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i>  <i>Site English Spoken: Yes</i>  <i>Site Languages(s) Spoken: Spanish, Tagalog</i> <i>Cultural Competency: No</i>  <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i> <i>American Sign Language (ASL):</i></p>	<p><i>Cultural Competency: No</i>  <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i> <i>American Sign Language (ASL):</i></p>
<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i>  <i>Website: N/A</i></p>	<p>SAN YSIDRO HEALTH EL CAJON <i>Provider ID: 569910</i>  875 EL CAJON BLVD EL CAJON, CA 92020-5714  <i>Phone: 619-662-4100</i>  <i>After Hours Phone:</i></p>	<p>SAN YSIDRO HEALTH EL CAJON <i>Provider ID: 569910</i>  875 EL CAJON BLVD EL CAJON, CA 92020-5714  <i>Phone: 619-662-4100</i>  <i>After Hours Phone: 619-662-4100</i> <i>License Number: A127706</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i>  <i>Site English Spoken: Yes</i>  <i>Site Languages(s) Spoken:</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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


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

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A96002

NPI: 1598122871


Accepting New Patients: Yes

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

📞 *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

🕒 *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


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B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

 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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

🕒 *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*

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: 619-515-2498*

🕒 *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
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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal




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: 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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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):

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

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B. Clínicas de salud con calificación federal

 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

 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: 619-515-2499

 After Hours Phone:
619-515-2499

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

 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

 526 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

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


ENCINITAS

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM


WE 9:00AM-5:00PM

TH 9:00AM-5:00PM







FR 9:00AM-5:00PM

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal








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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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 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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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
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



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B. Clínicas de salud con calificación federal






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: 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): **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: 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): **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: 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
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: G61829
 NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken: Yes*
Cultural Competency: No

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

NEIGHBORHOOD


HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

Fax: 360-466-2745

 After Hours Phone:
760-520-8100

License Number: 80000397

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100


 After Hours Phone:
760-520-8100


License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

FR 8:00AM-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 PEDIATRICS AND PRENATAL




Provider ID: 206266
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: 760-520-8340
 After Hours Phone: 760-520-8340
 License Number: A67626
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-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 PEDIATRICS AND PRENATAL






Provider ID: 206266
 425 N DATE ST
 ESCONDIDO, CA 92025-3413
 Phone: 760-520-8340
 Fax: 360-462-2752


 After Hours Phone: 760-520-8340
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes
 Cultural Competency: No
 Hours: SU 8:00AM-5:00PM
 MO 8:00AM-5:00PM
 TU 8:00AM-5:00PM
 WE 8:00AM-5:00PM
 TH 8:00AM-5:00PM
 FR 8:00AM-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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.






B. Clínicas de salud con calificación federal



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 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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-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

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

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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


TU 8:00AM-5:00PM
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-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: A51447
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 Site English Spoken: Yes
 Site Language(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 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
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:

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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): Website: N/A
 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 N
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 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: BORREGO COMMUNITY HEALTH FOUNDTION

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 N
 MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 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

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
 WE 9:00AM-5:00PM
 TH 9:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

FOUNDATION

Website: N/A

LAKESIDE

NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

10039 VINE ST

LAKESIDE, CA 92040-3120

Phone: 858-218-3000

After Hours Phone: 858-218-3000

License Number: A152372

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

LEMON GROVE

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

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

 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):

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: A154838

NPI: 1134155377

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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: 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

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

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B. Clínicas de salud con calificación federal

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):  Website: N/A

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN


 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
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):

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: C174771

NPI: 1134155377

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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: 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):
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

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 619-515-2500

 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):  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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

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: 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 N

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

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: 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 N

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

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: 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 N

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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

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B. Clínicas de salud con calificación federal



 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
 WE 9:00AM-5:00PM
 TH 9:00AM-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


NATIONAL CITY


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.or
 g

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.or
 g

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


 *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

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

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
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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






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:
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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 *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: 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*

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*

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

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):
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

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 DIEGO

Website: www.fhcsd.org

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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
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

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
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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

FR 8:00AM-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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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): **SAN YSIDRO HEALTH**

N

 **Accessibility:** CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 **Website:** www.ihpsocal.org

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): **SAN YSIDRO HEALTH**

N

 **Accessibility:** CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 **Website:** www.ihpsocal.org


 **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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

🕒 *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*

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):

♿ *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 *Website: www.ihpsocal.org*

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

📍 217 HIGHLAND AVE
 NATIONAL CITY, CA
 91950-1518

☎ *Phone: 619-280-4213*

🕒 *After Hours Phone: 619-280-4213*

License Number: A167184

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

🗣 *Site English Spoken: Yes Cultural Competency: No*

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




B. Clínicas de salud con calificación federal


 *After Hours Phone:*
 619-434-7308
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: 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



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):
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


 *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*

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
 OCEANSIDE, CA 2057-6043

 *Phone: 760-631-5000*

 *After Hours Phone:
 760-631-5000*

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: Yes*
Cultural Competency: No

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

Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

- 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
- 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
- VISTA COMMUNITY CLINIC**
Provider ID: 206341
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
- VISTA COMMUNITY CLINIC**
Provider ID: 206341
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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


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: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566
Fax: 760-736-8740


 After Hours Phone:
760-757-4566

NPI: 1598122871

Accepting New Patients: Yes
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
WE 8:00AM-5:00PM
TH 8:00AM-5:00PM
FR 8:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

FR 8:00AM-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: 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

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF
SOUTHERN CALIFORNIA


Website: www.ihpsocal.org


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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: 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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

SA 8:00AM-5:00PM
 American Sign Language (ASL):  Website: www.ihpsocal.org
 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

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

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


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA


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


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):  Website: www.ihpsocal.org
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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

FR 8:00AM-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: 760-736-6767

 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




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


 Website: N/A


PAUMA VALLEY


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
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


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





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Cultural Competency: No

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

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*

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:*



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal




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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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 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






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B. Clínicas de salud con calificación federal


FR 8:00AM-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
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 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
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

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B. Clínicas de salud con calificación federal

<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>PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>SAN DIEGO, CA 92113-1432  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A78373 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>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</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</p>
<p>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</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</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p> Site English Spoken: yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>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</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

Cultural Competency: No

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

 *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*

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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

LINDA VISTA HEALTH CARE CTR






























Provider ID: 206046

6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342

Phone: 858-279-0925




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


-  *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
-  *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: 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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
 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-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: 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
TH 9:00AM-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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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:
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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP15657

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

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

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B. Clínicas de salud con calificación federal

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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

 Site English Spoken: Yes
Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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

 Website: www.fhcsd.org


OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE
 235
 SAN DIEGO, CA 92126-2375

 Phone: 844-200-2426

Fax: 858-578-4417


 After Hours Phone:
 844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

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.operationsa
 mahan.org](http://www.operationsa

 mahan.org)

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE
 235
 SAN DIEGO, CA 92126-2375

 Phone: 844-200-2426

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.operationsa
 mahan.org](http://www.operationsa


 mahan.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.operationsa
 mahan.org](http://www.operationsa


 mahan.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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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


 Site English Spoken: yes
Cultural Competency: No

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


 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 - 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
WE 9:00AM-5:00PM
TH 9:00AM-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














NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p>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</p>	<p> Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 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: FAMILY HEALTH CENTERS OF SAN DIEGO  Website: www.fhcsd.org</p>
<p> Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 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: FAMILY HEALTH CENTERS OF SAN DIEGO  Website: www.fhcsd.org</p>	<p>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</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  Website: www.fhcsd.org</p>	<p>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</p>	<p>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</p>
<p>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</p>	<p>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</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  Website: www.fhcsd.org</p>


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal





 *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*



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*

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 Language(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: DC29074
NPI: 1801907449
Accepting New Patients: Yes

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

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

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:
619-515-2424


License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 *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*

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

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

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-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

KING CHAVEZ HEALTH CENTER




Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100






Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


 After Hours Phone:
 619-662-4100
 License Number: A101017
 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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal




 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A165432
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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

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B. Clínicas de salud con calificación federal

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

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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


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B. Clínicas de salud con calificación federal

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: 20A12653

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: 20A12732

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

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

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B. Clínicas de salud con calificación federal

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-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: 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

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

 **After Hours Phone:**
619-515-2300

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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

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: 619-255-9155

Fax: 619-284-4731


 After Hours Phone:
619-255-9155


License Number: 20A6433

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

Fax: 619-749-5480


 After Hours Phone:
619-255-9155

License Number: A81682

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 *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*

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 PROVIDER*


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC

 *Website: www.lamaestra.org*

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375

 *Phone: 844-200-2426*



 *After Hours Phone: 844-200-2426*

License Number: A161105

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

 *Site English Spoken: yes*
 *Site Languages(s) Spoken: Spanish, Tagalog*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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.operationsa
mahan.org*

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 *10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126-2375*

 *Phone: 844-200-2426*

 *After Hours Phone:
844-200-2426*

License Number: 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*

 *Accessibility: CONTACT
PROVIDER*

Medical Group/IPA:

OPERATION SAMAHAN


 *Website: www.operationsa
mahan.org*

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 *10737 CAMINO RUIZ STE
235*

SAN DIEGO, CA 92126-2375

 *Phone: 844-200-2426*

 *After Hours Phone:
844-200-2426*

License Number: 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.operationsa
mahan.org*

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

 *10737 CAMINO RUIZ STE
235*

SAN DIEGO, CA 92126-2375

 *Phone: 844-200-2426*

 *After Hours Phone:
844-200-2426*

License Number: 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.operationsa
mahan.org*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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

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B. Clínicas de salud con calificación federal

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-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

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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



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

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 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: A112781
 NPI: 1598122871
 Accepting New Patients: Yes
 Min/Max Age: 0\None
 Site English Spoken: Yes



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



B. Clínicas de salud con calificación federal

<p> <i>Site Languages(s) Spoken:</i> Spanish</p>	<p>FR 8:30AM-5:00PM SA 8:30AM-5:00PM</p>	<p>SOUTHERN CALIFORNIA  <i>Website:</i> www.ibclinic.org</p>
<p><i>Cultural Competency:</i> No</p>	<p><i>American Sign Language (ASL):</i></p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p>
<p> <i>Hours:</i> 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</p>	<p>N  <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA  <i>Website:</i> www.ibclinic.org</p>	<p><i>Provider ID:</i> 206360  1809 NATIONAL AVE SAN DIEGO, CA 92113-2113  <i>Phone:</i> 619-515-2300  <i>After Hours Phone:</i> 619-515-2300 <i>License Number:</i> A68463 <i>NPI:</i> 1134155377</p>
<p><i>American Sign Language (ASL):</i></p>	<p>NESTOR COMMUNITY HEALTH CENTER</p>	<p><i>Accepting New Patients:</i> Yes</p>
<p>N</p>	<p> 1016 OUTER RD SAN DIEGO, CA 92154-1351  <i>Phone:</i> 619-429-3733  <i>After Hours Phone:</i> 619-429-3733 <i>License Number:</i> NP22031 <i>NPI:</i> 1598122871</p>	<p><i>Min/Max Age:</i> 0\None</p>
<p> <i>Accessibility:</i> CONTACT PROVIDER</p>	<p><i>Accepting New Patients:</i> Yes</p>	<p> <i>Site English Spoken:</i> Yes</p>
<p><i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA</p>	<p><i>Min/Max Age:</i> 0\None</p>	<p> <i>Site Languages(s) Spoken:</i> Spanish</p>
<p> <i>Website:</i> www.ibclinic.org</p>	<p> <i>Site English Spoken:</i> Yes</p>	<p> <i>Cultural Competency:</i> No</p>
<p>NESTOR COMMUNITY HEALTH CENTER</p>	<p> <i>Site Languages(s) Spoken:</i> Spanish</p>	<p> <i>Hours:</i> SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 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><i>Provider ID:</i> 214492</p>	<p> <i>Hours:</i> 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</p>	<p><i>American Sign Language (ASL):</i></p>
<p> 1016 OUTER RD SAN DIEGO, CA 92154-1351</p>	<p>N</p>	<p> <i>Accessibility:</i> CONTACT PROVIDER</p>
<p> <i>Phone:</i> 619-429-3733</p>	<p><i>Medical Group/IPA:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>Medical Group/IPA:</i> FAMILY HEALTH CENTERS OF SAN DIEGO</p>
<p> <i>After Hours Phone:</i> 619-429-3733</p>	<p> <i>Website:</i> www.fhcsd.org</p>	<p> <i>Website:</i> www.fhcsd.org</p>
<p><i>License Number:</i> A165398</p>	<p> <i>Site English Spoken:</i> Yes</p>	<p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p>
<p><i>NPI:</i> 1598122871</p>	<p> <i>Site Languages(s) Spoken:</i> Spanish</p>	<p><i>Provider ID:</i> 206360</p>
<p><i>Accepting New Patients:</i> Yes</p>	<p> <i>Site Languages(s) Spoken:</i> Spanish</p>	<p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p>
<p><i>Min/Max Age:</i> 0\None</p>	<p> <i>Accessibility:</i> CONTACT PROVIDER</p>	
<p> <i>Site English Spoken:</i> Yes</p>	<p><i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA</p>	
<p> <i>Site Languages(s) Spoken:</i> Spanish</p>		
<p><i>Cultural Competency:</i> No</p>		
<p> <i>Hours:</i> 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</p>		



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal





 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
 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


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B. Clínicas de salud con calificación federal

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

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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

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B. Clínicas de salud con calificación federal

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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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

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






Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p><i>g</i></p> <p>LA MAESTRA FAMILY CLINIC INC <i>Provider ID: 185268</i></p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> <i>Phone: 619-255-9155</i></p> <p> <i>After Hours Phone: 619-255-9155</i></p> <p><i>License Number: G87837</i> <i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i> <i>N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LA MAESTRA FAMILY CLINIC</i></p> <p> <i>Website: www.lamaestra.org</i></p>	<p> <i>After Hours Phone: 619-255-9155</i></p> <p><i>License Number: NP95013257</i> <i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i> <i>N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LA MAESTRA FAMILY CLINIC</i></p> <p> <i>Website: www.lamaestra.org</i></p>	<p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i> <i>N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: LA MAESTRA FAMILY CLINIC</i></p> <p> <i>Website: www.lamaestra.org</i></p>
<p>LA MAESTRA FAMILY CLINIC INC <i>Provider ID: 185268</i></p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> <i>Phone: 619-255-9155</i></p>	<p>LA MAESTRA FAMILY CLINIC INC <i>Provider ID: 185268</i></p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608</p> <p> <i>Phone: 619-255-9155</i></p> <p> <i>After Hours Phone: 619-255-9155</i></p> <p><i>License Number: PA13694</i> <i>NPI: 1609849074</i></p> <p><i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p>	<p>FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL <i>Provider ID: 419529</i></p> <p> 2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113-1195</p> <p> <i>Phone: 619-515-2422</i></p> <p> <i>After Hours Phone: 619-515-2422</i></p> <p><i>License Number: PA20888</i> <i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i> <i>MO 8:00AM-5:00PM</i> <i>TU 8:00AM-5:00PM</i> <i>WE 8:00AM-5:00PM</i> <i>TH 8:00AM-5:00PM</i> <i>FR 8:00AM-5:00PM</i> <i>SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

- 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
 **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 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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
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 OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529




























 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

-  *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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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 HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
 SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
 619-515-2444

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

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):

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:

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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 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
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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




B. Clínicas de salud con calificación federal



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
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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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
 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

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B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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


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


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B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



B. Clínicas de salud con calificación federal

 *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*

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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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:



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B. Clínicas de salud con calificación federal

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



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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



B. Clínicas de salud con calificación federal

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

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115-4403
 Phone: 619-662-4100
 After Hours Phone:
 619-662-4100
 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



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
 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 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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



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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

-  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):  Website: www.sdfamilycare.org
 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):  Website: www.sdfamilycare.org
 N
-  Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: N/A
- 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: 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):  Website: www.sdfamilycare.org
 N
-  Accessibility: CONTACT PROVIDER
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Website: www.sdfamilycare.org
- ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER**
 Provider ID: 403583
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone: 619-233-8500
 License Number: 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):  Website: www.sdfamilycare.org
 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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 *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: 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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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: 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):

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: NP10769


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: PA54617


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



B. Clínicas de salud con calificación federal

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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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

 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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:
619-515-2525

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

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B. Clínicas de salud con calificación federal

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: 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

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B. Clínicas de salud con calificación federal

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
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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

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

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B. Clínicas de salud con calificación federal


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

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


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B. Clínicas de salud con calificación federal

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
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

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B. Clínicas de salud con calificación federal


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
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: 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
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

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B. Clínicas de salud con calificación federal

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

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

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B. Clínicas de salud con calificación federal

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

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


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B. Clínicas de salud con calificación federal

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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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:
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

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


SAN MARCOS

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
 SAN MARCOS, CA
 92069-2973

 Phone: 760-736-6767

 After Hours Phone:
 760-736-6767


License Number: 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: NP20893

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

-  *After Hours Phone:*
 760-736-6767
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
-  *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: NP95002545
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
-  *After Hours Phone:*
 760-736-6767
License Number: NP95001653
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\None
 *Site English Spoken:* Yes
-  *After Hours Phone:*
 760-736-6767
License Number: NP95003903
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767


License Number: PA17101

NPI: 1598122871

Accepting New Patients: Yes

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: PA19825

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: 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

































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B. Clínicas de salud con calificación federal

FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 Website: www.ihpsocal.org	 After Hours Phone: 760-736-6767
American Sign Language (ASL): N	TRUECARE Provider ID: 625875	License Number: A63903 NPI: 1598122871
 Accessibility: CONTACT PROVIDER	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	Accepting New Patients: Yes Min/Max Age: 0\None
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 Phone: 760-736-6767	<input type="checkbox"/> Site English Spoken: Yes
 Website: www.ihpsocal.org	 After Hours Phone: 760-736-6767	<input type="checkbox"/> Site Languages(s) Spoken: Spanish
TRUECARE	License Number: A60958	Cultural Competency: No
Provider ID: 625875	NPI: 1598122871	 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM
 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	Accepting New Patients: Yes Min/Max Age: 0\None	American Sign Language (ASL): N
 Phone: 760-736-6767	<input type="checkbox"/> Site English Spoken: Yes	 Accessibility: CONTACT PROVIDER
 After Hours Phone: 760-736-6767	<input type="checkbox"/> Site Languages(s) Spoken: Spanish	Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
License Number: A48980	Cultural Competency: No	 Website: www.ihpsocal.org
NPI: 1598122871	 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	
Accepting New Patients: Yes Min/Max Age: 0\None	American Sign Language (ASL): N	TRUECARE
<input type="checkbox"/> Site English Spoken: Yes	 Accessibility: CONTACT PROVIDER	Provider ID: 625875
<input type="checkbox"/> Site Languages(s) Spoken: Spanish	Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973
Cultural Competency: No	 Website: www.ihpsocal.org	 Phone: 760-736-6767
 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM		 After Hours Phone: 760-736-6767
American Sign Language (ASL): N	TRUECARE Provider ID: 625875	License Number: A71311 NPI: 1598122871
 Accessibility: CONTACT PROVIDER	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	Accepting New Patients: Yes Min/Max Age: 0\None
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 Phone: 760-736-6767	<input type="checkbox"/> Site English Spoken: Yes























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B. Clínicas de salud con calificación federal

 Site Languages(s) Spoken: Spanish	FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 Website: www.ihpsocal.org
Cultural Competency: No	American Sign Language (ASL):	TRUECARE
 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	N	Provider ID: 625875
American Sign Language (ASL):	 Accessibility: CONTACT PROVIDER	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973
N	Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 Phone: 760-736-6767
 Accessibility: CONTACT PROVIDER	 Website: www.ihpsocal.org	 After Hours Phone:
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	TRUECARE	760-736-6767
 Website: www.ihpsocal.org	Provider ID: 625875	License Number: DC29074
TRUECARE	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	NPI: 1598122871
Provider ID: 625875	 Phone: 760-736-6767	Accepting New Patients: Yes
 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	 After Hours Phone:	Min/Max Age: 0\None
 Phone: 760-736-6767	760-736-6767	 Site English Spoken: Yes
 After Hours Phone:	License Number: C54157	 Site Languages(s) Spoken:
760-736-6767	NPI: 1598122871	Spanish
License Number: A93248	Accepting New Patients: Yes	Cultural Competency: No
NPI: 1598122871	Min/Max Age: 0\None	 Hours: SU 8:00AM-5:00PM
Accepting New Patients: Yes	 Site English Spoken: Yes	MO 8:00AM-5:00PM
Min/Max Age: 0\None	 Site Languages(s) Spoken:	TU 8:00AM-5:00PM
 Site English Spoken: Yes	Spanish	WE 8:00AM-5:00PM
 Site Languages(s) Spoken:	Cultural Competency: No	TH 8:00AM-5:00PM
Spanish	 Hours: SU 8:00AM-5:00PM	FR 8:00AM-5:00PM
Cultural Competency: No	MO 8:00AM-5:00PM	SA 8:00AM-5:00PM
 Hours: SU 8:00AM-5:00PM	TU 8:00AM-5:00PM	American Sign Language (ASL):
MO 8:00AM-5:00PM	WE 8:00AM-5:00PM	N
TU 8:00AM-5:00PM	TH 8:00AM-5:00PM	 Accessibility: CONTACT
WE 8:00AM-5:00PM	FR 8:00AM-5:00PM	PROVIDER
TH 8:00AM-5:00PM	SA 8:00AM-5:00PM	Medical Group/IPA: IHP OF
American Sign Language (ASL):	N	SOUTHERN CALIFORNIA
N	 Accessibility: CONTACT	 Website: www.ihpsocal.org
 Accessibility: CONTACT	PROVIDER	 1595 GRAND AVE STE 100
Medical Group/IPA: IHP OF	Medical Group/IPA: IHP OF	SAN MARCOS, CA
SOUTHERN CALIFORNIA	SOUTHERN CALIFORNIA	92069-2973
 Phone: 760-736-6767	 Phone: 760-736-6767	Provider ID: 625875

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

-  *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
-  *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
- 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


 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

 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p>SA 9:00AM-5:00PM 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 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</p>	<p>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</p>
<p>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</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): 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 92078-2450  Phone: 760-736-6767 Fax: 760-736-6744  After Hours Phone:</p>	<p>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</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

MO 9:00AM-5:00PM
 TU 9:00AM-5:00PM
 WE 9:00AM-5:00PM
 TH 9:00AM-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: 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):

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: 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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

SAN YSIDRO

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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

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


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B. Clínicas de salud con calificación federal


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): Medical Group/IPA: IHP OF

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 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 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): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: www.ihpsocal.org

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-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: A51843

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: C42207

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: 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

 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

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP OF

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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 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

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-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

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B. Clínicas de salud con calificación federal

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

Site English Spoken: Yes

Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

SA 8:00AM-5:30PM
 American Sign Language (ASL):  Website: www.ihpsocal.org
 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: 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):  Website: www.ihpsocal.org
 N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal




<p>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</p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org</p>	<p>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</p>
<p>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</p>	<p>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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> 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</p>
<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> 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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> 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</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</p>	<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






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



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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal




<p>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</p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org</p>	<p>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</p>
<p>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</p>	<p>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</p>	<p>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</p>
<p>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</p>	<p>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</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</p>	<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org</p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292 4004 BEYER BLVD SAN YSIDRO, CA</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






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

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 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: 619-205-6305
 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,
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


 *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*

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: 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*

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: 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 HLTH SAN DIEGO
PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*


License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None





























 *Site English Spoken: Yes
Cultural Competency: No*

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

American Sign Language (ASL):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</p> <p><i>Provider ID: 227469</i></p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A164201</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i></p>	<p><i>619-662-4100</i></p> <p><i>License Number: DPM2930</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:30PM</i></p>
<p>SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS</p> <p><i>Provider ID: 227469</i></p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322</p> <p> <i>Phone: 619-662-4100</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: A153975</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i></p>	<p><i>MO 8:00AM-5:30PM</i></p> <p><i>TU 8:00AM-5:30PM</i></p> <p><i>WE 8:00AM-5:30PM</i></p> <p><i>TH 8:00AM-5:30PM</i></p> <p><i>FR 8:00AM-5:30PM</i></p> <p><i>SA 8:00AM-5:30PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><i>MO 8:00AM-5:30PM</i></p> <p><i>TU 8:00AM-5:30PM</i></p> <p><i>WE 8:00AM-5:30PM</i></p> <p><i>TH 8:00AM-5:30PM</i></p> <p><i>FR 8:00AM-5:30PM</i></p> <p><i>SA 8:00AM-5:30PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p><i>Fax: 619-205-6341</i></p> <p> <i>After Hours Phone:</i></p>	<p>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p><i>Provider ID: 206292</i></p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007</p> <p> <i>Phone: 619-662-4100</i></p> <p><i>Fax: 619-205-6341</i></p> <p> <i>After Hours Phone: 619-662-4100</i></p> <p><i>License Number: 20A7241</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken:</i></p>

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B. Clínicas de salud con calificación federal

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
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
🕒 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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

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: 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






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







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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.








B. Clínicas de salud con calificación federal

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
 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


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B. Clínicas de salud con calificación federal

 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

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 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







SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411




 4050 BEYER BLVD





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal





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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal






 *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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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): Website: www.ihpsocal.org

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):

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal


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: 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


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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

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

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):  Website: www.fhcsd.org


N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

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: 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: 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 N

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

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: 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: 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 N

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

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: 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: 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 N

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


 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

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

 Site English Spoken: Yes
Cultural Competency: No

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

WE 9:00AM-5:00PM
TH 9:00AM-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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.








B. Clínicas de salud con calificación federal

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No

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

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes
Cultural Competency: No

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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

VCC DURIAN

Provider ID: 411518
 105 DURIAN ST STE A
VISTA, CA 92083-6206
 Phone: 844-308-5003

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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):
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









































Provider ID: 206338

📍 1000 VALE TERRACE DR
VISTA, CA 92084-5218

☎ Phone: 760-631-5000

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

-  *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 SOUTHERN CALIFORNIA
 *Website:* www.vistacommunityclinic.org
-  *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
-  *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 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
-  *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 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


B. Clínicas de salud con calificación federal

 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
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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

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
 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
































Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

-  *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: 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
-  *Website:* www.vistacommunityclinic.org

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal

-  *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 SOUTHERN CALIFORNIA
 *Website:* www.vistacommunityclinic.org
-  *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
-  *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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

B. Clínicas de salud con calificación federal


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

 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


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B. Clínicas de salud con calificación federal

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
 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

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B. Clínicas de salud con calificación federal

 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

 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.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
 VISTA, CA 92084-5218

 Phone: 760-414-3892

 After Hours Phone:
 760-414-3892


License Number: NP23217

NPI: 1598122871


Accepting New Patients: Yes

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

 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

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria


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

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C. Directorio de atención primaria




 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

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C. Directorio de atención primaria

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

American Sign Language (ASL): NPI: 1710147566

N

 Accessibility: CONTACT PROVIDER


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

American Sign Language (ASL): NPI: 1164508073

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM
M-F 8:30AM-5:30PM
SA 8AM-2:30PM


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

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C. Directorio de atención primaria

<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 American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p>	<p>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 American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p>	<p><input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM</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</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 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 American Sign Language (ASL): N</p>	<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 American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER <input type="checkbox"/> Hours: M-F 8AM-5PM</p>
		<p>FQHC</p> <p>SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE, Provider ID: 519686</p>



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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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C. Directorio de atención primaria


 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









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C. Directorio de atención primaria

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


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C. Directorio de atención primaria

American Sign Language (ASL): **O'CONNOR, ERICA**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-2PM

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

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



PEDIATRICS

TANAKA, MARY

Provider ID: 465387

Provider Gender: Female

NPI: 1295962686

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Thai

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, RADY


CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

 3257 CAMINO DE LOS
COCHES STE 202

CARLSBAD, CA 92009

 Phone: (760) 633-3640

Fax: (760) 633-3644

 After Hours Phone: (760)
633-3640

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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. Directorio de atención primaria

 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

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C. Directorio de atención primaria

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)

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C. Directorio de atención primaria

Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL
 Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza


Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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-medical-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-medical-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-medical-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

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C. Directorio de atención primaria

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


ELSAYED, MOHAMMED

Provider ID: 19561

Provider Gender: Male

NPI: 1821033424

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,


PARADISE VALLEY HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

 330 OXFORD ST STE 106

CHULA VISTA, CA 91911

 Phone: (619) 409-1802

Fax: (619) 409-1831

 After Hours Phone: (619)
409-1802


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH 9AM-5PM
F 8AM-4PM

FAMILY PRACTICE

ELSAYED, MOHAMMED


Provider ID: 19561


Provider Gender: Male

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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-medical-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-medical-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-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

SHAHTAJI, ALAN

Provider ID: 427322


Provider Gender: Male

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>FAMILY PRACTICE</p> <p>TOLEDO-NADER, CAROLL Provider ID: 427322 Provider Gender: Male License Number: A41486 NPI: 1427126648</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL Board Certified Specialty: No</p> <p> 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</p>	<p> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No</p> <p> 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</p>	<p>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</p>
<p>FAMILY PRACTICE</p> <p>TREJO, RAUL Provider ID: 427322 Provider Gender: Male License Number: A77936 NPI: 1174534184</p> <p> Provider English Spoken: Y</p>	<p>FAMILY PRACTICE</p> <p>VELASQUEZ, SHARON Provider ID: 427322 Provider Gender: Female License Number: A71304 NPI: 1972732584</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No</p> <p> 678 3RD AVE</p>	<p>FAMILY PRACTICE</p> <p>WHITLEY, NICHOLAS Provider ID: 427322 Provider Gender: Male License Number: A118250 NPI: 1629394721</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA Board Certified Specialty: No</p> <p> 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</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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

 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

 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)

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria


 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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C. Directorio de atención primaria

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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C. Directorio de atención primaria

 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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C. Directorio de atención primaria

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)

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C. Directorio de atención primaria

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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C. Directorio de atención primaria

VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No





 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/chula-vista-medic-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

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-medic-al-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



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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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


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-medic

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. Directorio de atención primaria

 *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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DORINGO, ELAINIE

Provider ID: 267100

Provider Gender: Female
NPI: 1013005636

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO HOSPITAL LLC, RADY

CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SHARP CHULA VISTA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

📍 865 3RD AVE STE 101
CHULA VISTA, CA 91911

☎ Phone: (619) 426-7910

Fax: (619) 426-2337

🕒 After Hours Phone: (619) 426-7910

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 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

♿ 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

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C. Directorio de atención primaria





 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, 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

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

GHAHREMANI, SIMIN

Provider ID: 634787

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

GHAHREMANI, SIMIN

Provider ID: 482034

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

855 3RD AVE STE 2200

CHULA VISTA, CA 91911

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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

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

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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C. Directorio de atención primaria

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: 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

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

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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C. Directorio de atención primaria

 *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):


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria



<p>N  <i>Accessibility: CONTACT PROVIDER</i></p>	<p>PEDIATRICS</p> <p>YAO, CATHERINE <i>Provider ID: 371204</i> <i>Provider Gender: Female</i> <i>NPI: 1801166442</i></p>	<p><i>IRVINE MED CTR, DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO</i></p>
<p>PEDIATRICS</p> <p>VALENCIA, MARILES <i>Provider ID: 104059</i> <i>Provider Gender: Female</i> <i>NPI: 1275541625</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish, Tagalog</i> <i>Cultural Competency: N</i> <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>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Board Certified Specialty: No</i></p> <p> 769 MEDICAL CENTER CT STE 300 CHULA VISTA, CA 91911  <i>Phone: (619) 482-3090</i> <i>Fax: (619) 482-7350</i>  <i>After Hours Phone: (619) 482-3090</i>  <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i></p>	<p> 769 MEDICAL CENTER CT STE 300 CHULA VISTA, CA 91911  <i>Phone: (619) 482-3090</i> <i>Fax: (619) 482-7350</i>  <i>After Hours Phone: (619) 482-3090</i>  <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i></p>
<p> 1741 EASTLAKE PKWY STE 107 CHULA VISTA, CA 91915  <i>Phone: (619) 482-1700</i> <i>Fax: (619) 475-4578</i>  <i>After Hours Phone: (619) 482-1700</i>  <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i></p>	<p>PEDIATRICS</p> <p>ZARGAR, SHABNAM <i>Provider ID: 371075</i> <i>Provider Gender: Female</i> <i>NPI: 1417256074</i></p>	<p>PHYSICIANS ASSISTANT</p> <p>BALDONADO, ANALICIA <i>Provider ID: 417641</i> <i>Provider Gender: Female</i> <i>License Number: PA61683</i> <i>NPI: 1215477765</i></p>
<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i></p>	<p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UNIVERSITY OF CALIFORNIA</i></p>	<p> 352 L ST CHULA VISTA, CA 91911  <i>Phone: (619) 515-2325</i>  <i>After Hours Phone: (619)</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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-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


PHYSICIANS ASSISTANT

MENDEZ, JESUS

Provider ID: 427322
 Provider Gender: Male
 License Number: PA13796
 NPI: 1023202108

Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
 662-4100

 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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






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C. Directorio de atención primaria

PODIATRIST	<i>Board Certified Specialty: No</i>	THERAPIST
MANCHEL, BRUCE <i>Provider ID: 427322</i> <i>Provider Gender: Male</i> <i>License Number: DPM2930</i> <i>NPI: 1790890788</i> <input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR</i> <i>Board Certified Specialty: No</i> <input type="checkbox"/> 678 3RD AVE CHULA VISTA, CA 91910 <input type="checkbox"/> <i>Phone: (619) 662-4100</i> <input type="checkbox"/> <i>After Hours Phone: (619) 662-4100</i> <input type="checkbox"/> <i>Website: www.syhealth.org /clinics/chula-vista-medic-al-plaza</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i> <input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i>	<input type="checkbox"/> 251 LANDIS AVE CHULA VISTA, CA 91910 <input type="checkbox"/> <i>Phone: (619) 515-2500</i> <input type="checkbox"/> <i>After Hours Phone: (619) 515-2500</i> <input type="checkbox"/> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i> <input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i>	CUMMINGS, GEORGE <i>Provider ID: 206355</i> <i>Provider Gender: Male</i> <i>License Number: PT295173</i> <i>NPI: 1497236384</i> <input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <input type="checkbox"/> 251 LANDIS AVE CHULA VISTA, CA 91910 <input type="checkbox"/> <i>Phone: (619) 515-2500</i> <input type="checkbox"/> <i>After Hours Phone: (619) 515-2500</i> <input type="checkbox"/> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i> <input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i>
	<u>REGISTERED PHYSICAL THERAPIST</u>	
	AMAYA, RICARDO <i>Provider ID: 206355</i> <i>Provider Gender: Male</i> <i>License Number: PT37189</i> <i>NPI: 1437445566</i> <input type="checkbox"/> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <input type="checkbox"/> 251 LANDIS AVE CHULA VISTA, CA 91910 <input type="checkbox"/> <i>Phone: (619) 515-2500</i> <input type="checkbox"/> <i>After Hours Phone: (619) 515-2500</i> <input type="checkbox"/> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i> <input type="checkbox"/> <i>Accessibility: CONTACT PROVIDER</i>	
		<u>REGISTERED PHYSICAL THERAPIST</u>
		GEORGE, JENNIFER <i>Provider ID: 206355</i> <i>Provider Gender: Female</i> <i>License Number: PT294245</i> <i>NPI: 1215402177</i> <input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <input type="checkbox"/> 251 LANDIS AVE
SCHNEIDER, SARAH <i>Provider ID: 206355</i> <i>Provider Gender: Female</i> <i>License Number: DPM4819</i> <i>NPI: 1326282237</i> <input type="checkbox"/> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i>		

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.






C. Directorio de atención primaria



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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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.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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria


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


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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE


KASAWA, JOHN

Provider ID: 569910

Provider Gender: Male

License Number: A79338


NPI: 1134230329


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Board Certified Specialty: No

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LIN, SHUANG

Provider ID: 206354

Provider Gender: Female

License Number: A138887

NPI: 1689093684


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Board Certified Specialty: No

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.







C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria



 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


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C. Directorio de atención primaria

 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

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C. Directorio de atención primaria


 *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

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C. Directorio de atención primaria


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria



 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

Min/Max Age: 0\None

8:30AM-5:30PM

Provider ID: 418340

American Sign Language (ASL):

Provider Gender: Female


N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

License Number: A114181

NPI: 1740514249

 Hours: M-F 8AM-6PM
SA 8AM-2PM

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: 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

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND


HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No

 525 E MAIN ST
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

 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

MELLENDEZ BERRIOS, IARA

DEL

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 185267

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

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

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C. Directorio de atención primaria

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

**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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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria



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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria



 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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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






Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria




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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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. Directorio de atención primaria

 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



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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>INTERNAL MEDICINE</p> <p>AGUERO, AMETHYST Provider ID: 652372 Provider Gender: Female License Number: 20A19473 NPI: 1568021913</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"/> 128 N BROADWAY ESCONDIDO, CA 92025 <input type="phone"/> Phone: (760) 546-2858 <input type="phone"/> After Hours Phone: (760) 546-2858 <input type="website"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p>	<p>MEMORIAL HOSPITAL ENCINITAS Board Certified Specialty: No</p> <p><input type="checkbox"/> 704 E GRAND AVE ESCONDIDO, CA 92025 <input type="phone"/> Phone: (619) 662-4100 <input type="phone"/> After Hours Phone: (619) 662-4100 <input type="website"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p>	<p><input type="wheelchair"/> Accessibility: CONTACT PROVIDER <input type="clock"/> Hours: M-F 8AM-5PM SA 8AM-0PM</p>
<p>INTERNAL MEDICINE</p> <p>CARRERA, JORGE Provider ID: 588941 Provider Gender: Male License Number: G58033 NPI: 1184728586</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS</p>	<p>INTERNAL MEDICINE</p> <p>CHEN, MARGARET Provider ID: 235296 Provider Gender: Female NPI: 1659305084</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Greek, Spanish Cultural Competency: N Board Certified Specialty: No</p> <p><input type="checkbox"/> 460 N ELM ST ESCONDIDO, CA 92025 <input type="phone"/> Phone: (760) 520-8100 Fax: (360) 462-2745 <input type="phone"/> After Hours Phone: (760) 520-8100 <input type="website"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N</p>	<p>INTERNAL MEDICINE</p> <p>CHEN, MARGARET Provider ID: 206270 Provider Gender: Female License Number: A61751 NPI: 1659305084</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Greek, Spanish Cultural Competency: N Board Certified Specialty: No</p> <p><input type="checkbox"/> 460 N ELM ST ESCONDIDO, CA 92025 <input type="phone"/> Phone: (760) 520-8100 <input type="phone"/> After Hours Phone: (760) 520-8100 <input type="website"/> Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER <input type="clock"/> Hours: M-F 8AM-5PM SA 8AM-0PM</p>
		<p>INTERNAL MEDICINE</p> <p>VETTICADEN, SANTOSH Provider ID: 206270 Provider Gender: Male License Number: C53062 NPI: 1679102461</p> <p><input type="checkbox"/> Provider English Spoken: Y</p>


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C. Directorio de atención primaria

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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C. Directorio de atención primaria








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: 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


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C. Directorio de atención primaria

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


DOSHI, NEELIMA


Provider ID: 424775

Provider Gender: Female

License Number: A67626

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN


DIEGO

Board Certified Specialty: No

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 690-5900


 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


IBRAHIM, MAGED

Provider ID: 419344

Provider Gender: Male

License Number: C141296

NPI: 1306852934

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP

Board Certified Specialty: No

 1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

 Phone: (760) 871-0606

 After Hours Phone: (760) 871-0606

 Website: N

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria







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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p><u>CERTIFIED NURSE PRACTITIONER</u></p> <p>KELLEHER, BRIDGET Provider ID: 624122 Provider Gender: Female License Number: NP95003447 NPI: 1245695006</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR Board Certified Specialty: No</p> <p> 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</p>	<p> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR Board Certified Specialty: No</p> <p> 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</p>	<p>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</p>
<p><u>CERTIFIED NURSE PRACTITIONER</u></p> <p>KELLEHER, BRIDGET Provider ID: 624122 Provider Gender: Female License Number: NP95003447 NPI: 1245695006</p> <p> Provider English Spoken: Y</p>	<p><u>CERTIFIED NURSE PRACTITIONER</u></p> <p>RACKHAM, KELLY Provider ID: 624122 Provider Gender: Male License Number: NP95015717 NPI: 1801497284</p> <p> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p> <p> 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</p>	<p><u>CERTIFIED NURSE PRACTITIONER</u></p> <p>RACKHAM, KELLY Provider ID: 624122 Provider Gender: Male License Number: NP95015717 NPI: 1801497284</p> <p> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p> <p> 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</p>

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C. Directorio de atención primaria

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):

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C. Directorio de atención primaria

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM SA 8AM-5PM</p>	<p> After Hours Phone: (760) 723-6200</p> <p> Website: www.vistacommunityclinic.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL):</p>	<p>DEL RE, AMANDA</p> <p>Provider ID: 238960</p> <p>Provider Gender: Female</p> <p>NPI: 1548499957</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</p> <p>Board Certified Specialty: No</p>
FQHC		
<p>VISTA COMMUNITY CLINIC,</p> <p>Provider ID: 624122</p> <p>NPI: 1316501562</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p>	<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M 8AM-4PM TU 8AM-0:30PM W-TH 8AM-5PM</p>	<p>Phone: (760) 451-0070</p> <p>Fax: (760) 451-1499</p> <p> 1107 S MISSION RD FALLBROOK, CA 92028</p>
FQHC		
<p>VISTA COMMUNITY CLINIC,</p> <p>Provider ID: 624122</p> <p>NPI: 1649662719</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p>	<p> Phone: (760) 723-6200</p> <p> After Hours Phone: (760) 723-6200</p> <p> Website: www.vistacommunityclinic.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL):</p>	<p> Phone: (760) 451-0070</p> <p>Fax: (760) 451-1499</p> <p> After Hours Phone: (760) 451-0070</p> <p> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\19</p> <p>American Sign Language (ASL):</p>
FQHC		
<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M 8AM-4PM TU 8AM-0:30PM W-TH 8AM-5PM</p>	<p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p> <p> Phone: (760) 723-6200</p> <p> After Hours Phone: (760) 723-6200</p> <p> Website: www.vistacommunityclinic.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL):</p>	<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p>
FQHC		
<p>VISTA COMMUNITY CLINIC,</p> <p>Provider ID: 624122</p> <p>NPI: 1851300123</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p> 321 E ALVARADO ST FALLBROOK, CA 92028</p>	<p> Phone: (760) 723-6200</p>	<p>PEDIATRICS</p> <p>PAIK, JULIANA</p> <p>Provider ID: 504522</p> <p>Provider Gender: Female</p> <p>NPI: 1528167087</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO</p>
PEDIATRICS		

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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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C. Directorio de atención primaria

 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 *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

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

PAPA, RHETT

Provider ID: 480827

Provider Gender: Male

License Number: 20A11733

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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: 613881

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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


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C. Directorio de atención primaria

 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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 418302
 Provider Gender: Male
 License Number: NP22974
 NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog
 Cultural Competency: N

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

AQUINO, FELINO

Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
 Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8AM-6PM
 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

LIM, IMELDA

Provider ID: 417102

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

2743 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426

Website: www.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

LIM, IMELDA

Provider ID: 418302

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y
 Provider Language(s)
 Spoken: Tagalog


Cultural Competency: N


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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

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.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: 185270

Provider Gender: Female


License Number: NP4430


NPI: 1346437464


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308


 Website: www.lamaestra.org

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)



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria



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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 *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.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

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. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>FAMILY PRACTICE</p> <p>MEDINA, ALEXANDER Provider ID: 361428 Provider Gender: Male License Number: A133539 NPI: 1467714436</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL Board Certified Specialty: No</p> <p> 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</p>	<p> 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</p>	<p> 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</p>
<p>FAMILY PRACTICE</p> <p>MOHAMEDI, NADIA Provider ID: 227418 Provider Gender: Female License Number: A146819 NPI: 1477947364</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>FAMILY PRACTICE</p> <p>NAVARRO, VANESSA Provider ID: 227418 Provider Gender: Female License Number: A113624 NPI: 1952563421</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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</p> <p> 2400 E 8TH ST STE A NATIONAL CITY, CA 91950  Phone: (619) 662-4100 Fax: (619) 259-2807  After Hours Phone: (619) 662-4100</p>	<p>FAMILY PRACTICE</p> <p>NIKZAD, JASON Provider ID: 361428 Provider Gender: Male License Number: 20A12653 NPI: 1508121674</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL Board Certified Specialty: No</p> <p> 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</p>
		<p>FAMILY PRACTICE</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.






C. Directorio de atención primaria



 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.







C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.






C. Directorio de atención primaria



 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



C. Directorio de atención primaria

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.vistacommu
 nityclinic.org](http://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

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.vistacommu
 nityclinic.org](http://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
 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.vistacommu
 nityclinic.org](http://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
 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.vistacommu
 nityclinic.org](http://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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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: 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

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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C. Directorio de atención primaria

 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

 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

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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C. Directorio de atención primaria

<p>FAMILY PRACTICE</p> <p>FATLAND, SARAH Provider ID: 206341 Provider Gender: Female License Number: 20A18374 NPI: 1831354026</p> <p> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000 After Hours Phone: (760) 631-5000</p> <p> Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM SA 9AM-4PM</p>	<p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000 After Hours Phone: (760) 631-5000</p> <p> Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p>FAMILY PRACTICE</p> <p>PANICKER, CIBU Provider ID: 206341 Provider Gender: Male License Number: A149340 NPI: 1235492760</p> <p> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR Board Certified Specialty: No</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000 After Hours Phone: (760) 631-5000</p> <p> Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>
<p>FAMILY PRACTICE</p> <p>PANICKER, CIBU Provider ID: 206341 Provider Gender: Male License Number: A149340 NPI: 1235492760</p> <p> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR Board Certified Specialty: No</p>	<p>FAMILY PRACTICE</p> <p>PANICKER, CIBU Provider ID: 206341 Provider Gender: Male License Number: A149340 NPI: 1235492760</p> <p> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR Board Certified Specialty: No</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000 After Hours Phone: (760) 631-5000</p> <p> Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p>FAMILY PRACTICE</p> <p>PONSFORD, DIANA Provider ID: 402436 Provider Gender: Female License Number: 20A17371 NPI: 1407204969</p> <p> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR Board Certified Specialty: No</p>

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C. Directorio de atención primaria


 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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.vistacommu
nityclinic.org](http://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
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.vistacommu
nityclinic.org](http://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
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.vistacommu
nityclinic.org](http://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
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.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

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C. Directorio de atención primaria







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: 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
 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,
 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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




C. Directorio de atención primaria

 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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C. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

GENERAL PRACTICE


RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 *4700 N RIVER RD
OCEANSIDE, CA 92057*

 *Phone: (760) 631-5000*

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

GENERAL PRACTICE


RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish, Tagalog*

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 *4700 N RIVER RD
OCEANSIDE, CA 92057*

 *Phone: (760) 631-5000*

 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 344145

Provider Gender: Female

NPI: 1437166709

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

 *2210 MESA DR STE 300
OCEANSIDE, CA 92054*

 *Phone: (760) 736-6767*

Fax: (760) 736-8740

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): N

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

N

 Accessibility: CONTACT PROVIDER


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

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

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

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C. Directorio de atención primaria

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: 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

DANIELS, SARAH

Provider ID: 433806

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
OCEANSIDE, CA 92054


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C. Directorio de atención primaria








 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



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.vistacommunityclinic.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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 Website: www.vistacommunityclinic.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.vistacommunityclinic.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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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):
Board Certified Specialty: No
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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C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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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C. Directorio de atención primaria

 *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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria






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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C. Directorio de atención primaria

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><u>CERTIFIED NURSE</u> <u>PRACTITIONER</u></p> <hr/> <p>CELESTIN-RAMSEY, AKANKE <i>Provider ID: 451167</i> <i>Provider Gender: Female</i> <i>License Number: NP8563</i> <i>NPI: 1447450275</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</i> <i>Board Certified Specialty: No</i></p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org/clinics/king-chavez-health-center</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM SA 8AM-4PM</i></p> <hr/> <p style="text-align: center;"><u>CERTIFIED NURSE</u> <u>PRACTITIONER</u></p> <hr/> <p>CHASE, AVA LOU <i>Provider ID: 206360</i></p>	<p><i>Provider Gender: Female</i> <i>License Number: NP95000602</i> <i>NPI: 1164496386</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> <i>Phone: (619) 515-2300</i></p> <p> <i>After Hours Phone: (619) 515-2300</i></p> <p> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><u>CERTIFIED NURSE</u> <u>PRACTITIONER</u></p> <hr/> <p>DHARKAR SURBER, SAPNA <i>Provider ID: 185268</i> <i>Provider Gender: Female</i> <i>License Number: NP95013257</i> <i>NPI: 1538707765</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</i> <i>Board Certified Specialty: No</i></p> <p> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105</p>	<p> <i>Phone: (619) 255-9155</i></p> <p> <i>After Hours Phone: (619) 255-9155</i></p> <p> <i>Website: www.lamaestra.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-6PM SA 8AM-2PM</i></p> <hr/> <p style="text-align: center;"><u>CERTIFIED NURSE</u> <u>PRACTITIONER</u></p> <hr/> <p>DO, ELAINE <i>Provider ID: 233532</i> <i>Provider Gender: Female</i> <i>License Number: NP95019446</i> <i>NPI: 1215696307</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Board Certified Specialty: No</i></p> <p> 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105</p> <p> <i>Phone: (619) 280-2058</i></p> <p> <i>After Hours Phone: (619) 280-2058</i></p> <p> <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\22</i> <i>American Sign Language (ASL):</i></p>
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Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM SA 8AM-2PM</i></p>	<p><i>NPI: 1134686744</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  1809 NATIONAL AVE SAN DIEGO, CA 92113  <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p>
<hr/>		
<u>CERTIFIED NURSE PRACTITIONER</u>		
<hr/>		
<p>GARCIA, JOHNNY <i>Provider ID: 206363</i> <i>Provider Gender: Male</i> <i>License Number: NP95007000</i> <i>NPI: 1932622156</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  4725 MARKET ST SAN DIEGO, CA 92102  <i>Phone: (619) 515-2560</i>  <i>After Hours Phone: (619) 515-2560</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p>	<p style="text-align: center;"><u>CERTIFIED NURSE PRACTITIONER</u></p> <hr/> <p>HA, THU <i>Provider ID: 206046</i> <i>Provider Gender: Female</i> <i>License Number: NP95010517</i> <i>NPI: 1346443983</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Vietnamese</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  6973 LINDA VISTA RD SAN DIEGO, CA 92111  <i>Phone: (858) 279-0925</i>  <i>After Hours Phone: (858) 279-0925</i>  <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i></p>	<p style="text-align: center;"><u>CERTIFIED NURSE PRACTITIONER</u></p> <hr/> <p>HA, THU <i>Provider ID: 482070</i> <i>Provider Gender: Female</i> <i>License Number: NP95010517</i> <i>NPI: 1346443983</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Vietnamese</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  7011 LINDA VISTA RD SAN DIEGO, CA 92111  <i>Phone: (858) 810-8700</i>  <i>After Hours Phone: (858) 810-8700</i>  <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p>
<hr/>		
<u>CERTIFIED NURSE PRACTITIONER</u>		
<hr/>		
<p>GOLDFINGER, SARAH <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: NP95011313</i></p>	<p><i>Min/Max Age: 0\None</i></p>	<p style="text-align: center;"><u>CERTIFIED NURSE PRACTITIONER</u></p> <hr/> <p>HA, THU <i>Provider ID: 206046</i> <i>Provider Gender: Female</i> <i>License Number: NP95010517</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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**


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


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C. Directorio de atención primaria

 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):

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C. Directorio de atención primaria

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p>	<p>JOHNSON, SHAWNA AKIKO <i>Provider ID: 233597</i> <i>Provider Gender: Female</i> <i>License Number: NP95002518</i> <i>NPI: 1922237809</i></p>	<p>SAN DIEGO, CA 92101  <i>Phone: (619) 233-8500</i>  <i>After Hours Phone: (619) 233-8500</i>  <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i></p>
<hr/> <p><u>CERTIFIED NURSE</u> <u>PRACTITIONER</u></p> <hr/>		
<p>INSTONE, SUSAN <i>Provider ID: 233532</i> <i>Provider Gender: Female</i> <i>License Number: NP4858</i> <i>NPI: 1710223268</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Board Certified Specialty: No</i>  4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105  <i>Phone: (619) 280-2058</i>  <i>After Hours Phone: (619) 280-2058</i>  <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\22</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM SA 8AM-2PM</i></p>	<p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  4290 POLK AVE SAN DIEGO, CA 92105  <i>Phone: (619) 563-0250</i>  <i>After Hours Phone: (619) 563-0250</i>  <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5:30PM</i></p>
<hr/> <p><u>CERTIFIED NURSE</u> <u>PRACTITIONER</u></p> <hr/>		
<p>KEMP, KATHRINE <i>Provider ID: 403583</i> <i>Provider Gender: Female</i> <i>License Number: NP95018497</i> <i>NPI: 1316615313</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  1501 IMPERIAL AVE</p>	<p>KHAN, MATTHEW <i>Provider ID: 417987</i> <i>Provider Gender: Male</i> <i>License Number: NP17838</i> <i>NPI: 1942456124</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  4874 POLK AVE SAN DIEGO, CA 92105  <i>Phone: (619) 515-2426</i>  <i>After Hours Phone: (619) 515-2426</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i></p>	<p><i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i></p>
<hr/> <p><u>CERTIFIED NURSE</u> <u>PRACTITIONER</u></p> <hr/>		

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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

.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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria


 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria





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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

 *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





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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: 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

ODA, THAGHAR
Provider ID: 206363
Provider Gender: Female
License Number: NP9500205
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

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C. Directorio de atención primaria

 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

CERTIFIED NURSE




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C. Directorio de atención primaria

PRACTITIONER		
ROGERS, TANYA Provider ID: 417987 Provider Gender: Female License Number: NP95004443 NPI: 1558710038 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No <input type="checkbox"/> 4874 POLK AVE SAN DIEGO, CA 92105 <input type="checkbox"/> Phone: (619) 515-2426 <input type="checkbox"/> After Hours Phone: (619) 515-2426 <input type="checkbox"/> Website: www.fhcsd.org 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 8:30AM-5:30PM TU 8:30AM-9PM W-F 8:30AM-5:30PM SA 9AM-4PM	<input type="checkbox"/> After Hours Phone: (858) 810-8700 <input type="checkbox"/> Website: www.sdfamilycare.org 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 8AM-5PM TU 8AM-8PM W-F 8AM-5PM SA 9AM-1PM	CERTIFIED NURSE PRACTITIONER SABIN, NANCY Provider ID: 206046 Provider Gender: Female License Number: NP4668 NPI: 1285732586 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No <input type="checkbox"/> 6973 LINDA VISTA RD SAN DIEGO, CA 92111 <input type="checkbox"/> Phone: (858) 279-0925 <input type="checkbox"/> After Hours Phone: (858) 279-0925 <input type="checkbox"/> Website: www.sdfamilycare.org 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 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 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No <input type="checkbox"/> 7011 LINDA VISTA RD SAN DIEGO, CA 92111 <input type="checkbox"/> Phone: (858) 810-8700	CERTIFIED NURSE PRACTITIONER SABIN, NANCY Provider ID: 206046 Provider Gender: Female License Number: NP4668 NPI: 1285732586 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No <input type="checkbox"/> 6973 LINDA VISTA RD SAN DIEGO, CA 92111 <input type="checkbox"/> Phone: (858) 279-0925 <input type="checkbox"/> After Hours Phone: (858) 279-0925 <input type="checkbox"/> Website: www.sdfamilycare.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	CERTIFIED NURSE

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

PRACTITIONER	
SANTANGELO, JOANNE Provider ID: 206046 Provider Gender: Female License Number: NP2390 NPI: 1619370475 <input type="checkbox"/> 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 8AM-5PM TU 8AM-8PM W-F 8AM-5PM SA 9AM-1PM
 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: 482070 Provider Gender: Female License Number: NP7022 NPI: 1225012842 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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 PRACTITIONER SANTANGELO, JOANNE Provider ID: 482070 Provider Gender: Female License Number: NP2390 NPI: 1619370475 <input type="checkbox"/> 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	CERTIFIED NURSE PRACTITIONER SANTANGELO, JOANNE Provider ID: 206046 Provider Gender: Female License Number: NP2390 NPI: 1619370475 <input type="checkbox"/> 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
CERTIFIED NURSE PRACTITIONER SANTANGELO, JOANNE Provider ID: 482070 Provider Gender: Female License Number: NP2390 NPI: 1619370475 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No	CERTIFIED NURSE PRACTITIONER SANTANGELO, JOANNE Provider ID: 206046 Provider Gender: Female License Number: NP2390 NPI: 1619370475 <input type="checkbox"/> 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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 *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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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):

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C. Directorio de atención primaria

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>License Number: NP95001899</i> <i>NPI: 1245635564</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  4094 4TH AVE SAN DIEGO, CA 92103  <i>Phone: (619) 515-2545</i>  <i>After Hours Phone: (619) 515-2545</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p>
<p><u>CERTIFIED NURSE PRACTITIONER</u> WILLIAMS, BREAUNA <i>Provider ID: 185268</i> <i>Provider Gender: Female</i> <i>License Number: NP95001840</i> <i>NPI: 1063884864</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105  <i>Phone: (619) 255-9155</i>  <i>After Hours Phone: (619) 255-9155</i>  <i>Website: www.lamaestra.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-6PM SA 8AM-2PM</i></p>	<p><u>CERTIFIED REGISTERED NURSE MIDWIFE</u> BOSTON, LAURA <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: NM792</i> <i>NPI: 1174553259</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  1809 NATIONAL AVE SAN DIEGO, CA 92113  <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i></p>	<p><u>CERTIFIED REGISTERED NURSE MIDWIFE</u> GEPSTEIN, YANA <i>Provider ID: 402851</i> <i>Provider Gender: Female</i> <i>License Number: NM1662</i> <i>NPI: 1396956512</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Hebrew</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  3705 MISSION BLVD SAN DIEGO, CA 92109  <i>Phone: (619) 515-2444</i>  <i>After Hours Phone: (619) 515-2444</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p>
<p><u>CERTIFIED NURSE PRACTITIONER</u> WOLF, CELIA <i>Provider ID: 417937</i> <i>Provider Gender: Female</i></p>	<p><u>CHIROPRACTOR</u> ASSADIAN, MEHRAK <i>Provider ID: 451167</i> <i>Provider Gender: Female</i> <i>License Number: DC27523</i> <i>NPI: 1295278281</i>  <i>Provider English Spoken: Y</i></p>	

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C. Directorio de atención primaria


 *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


NPI: 1821463159


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No

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

 *Phone: (844) 200-2426*

 *After Hours Phone: (844)
200-2426*

 *Website: www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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



CHIROPRACTOR

ILCHENA, ALESANDRA
 Provider ID: 185268
 Provider Gender: Female
 License Number: DC32800
 NPI: 1871046664
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PALOMAR MEDICAL CENTER
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 798-3947
 After Hours Phone: (619) 798-3947
 Website: www.lamaestra.org
 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.syhealth.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.operationsamahan.org



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C. Directorio de atención primaria

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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C. Directorio de atención primaria

 *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*

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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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








Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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):

N

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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C. Directorio de atención primaria


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: 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

American Sign Language (ASL): Board Certified Specialty: No
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

American Sign Language (ASL): Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


CHUN, HYUN

Provider ID: 206360

Provider Gender: Male

License Number: A163978


NPI: 1083118988


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean

Cultural Competency: N

 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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 417937

Provider Gender: Female

License Number: A177922

NPI: 1679137780

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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

LACH, REBECCA


Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL):
N



 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

LEE, SANDRINE


Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French

Cultural Competency: N

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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


NAIAZI, 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.operationsamahahan.org



Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N


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C. Directorio de atención primaria

 *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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C. Directorio de atención primaria


 *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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>RODRIGUEZ, SEAN <i>Provider ID: 227409</i> <i>Provider Gender: Male</i> <i>License Number: A120576</i> <i>NPI: 1780909903</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i> <i>Board Certified Specialty: No</i>  3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113  <i>Phone: (619) 662-4100</i>  <i>After Hours Phone: (619) 662-4100</i>  <i>Website: https://www.syhealth.org/locations</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>ROSADO, IVAN <i>Provider ID: 517403</i> <i>Provider Gender: Male</i></p>	<p><i>License Number: A169434</i> <i>NPI: 1316479603</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  316 25TH ST SAN DIEGO, CA 92102  <i>Phone: (619) 662-4100</i>  <i>After Hours Phone: (619) 662-4100</i>  <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>SCHUMAKER, EDWARD <i>Provider ID: 185268</i> <i>Provider Gender: Male</i> <i>License Number: 20A6433</i> <i>NPI: 1184616872</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  4060 FAIRMOUNT AVE SAN DIEGO, CA 92105  <i>Phone: (619) 255-9155</i> <i>Fax: (619) 284-4731</i>  <i>After Hours Phone: (619) 255-9155</i>  <i>Website: www.lamaestra.org</i> <i>Medi-Cal Open Panel: Yes</i></p>	<p><i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-6PM SA 8AM-2PM</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>SCOTT, RYLEE <i>Provider ID: 402851</i> <i>Provider Gender: Male</i> <i>License Number: A162946</i> <i>NPI: 1457887911</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  3705 MISSION BLVD SAN DIEGO, CA 92109  <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <p>SCOTT, LAGINA <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: A160489</i> <i>NPI: 1558897009</i>  <i>Provider English Spoken: Y</i></p>
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Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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




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):


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>SMOOT, CHARLES <i>Provider ID: 206360</i> <i>Provider Gender: Male</i> <i>License Number: A97036</i> <i>NPI: 1245490358</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i></p> <p> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 9AM-5PM</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>SMOOT, CHARLES <i>Provider ID: 356145</i> <i>Provider Gender: Male</i> <i>License Number: A97036</i> <i>NPI: 1245490358</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s)</i></p>	<p><i>Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i></p> <p> 2391 ISLAND AVE SAN DIEGO, CA 92102</p> <p> <i>Phone: (619) 515-2435</i>  <i>After Hours Phone: (619) 515-2435</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>SNYDER, CHRISTOPHER <i>Provider ID: 517998</i> <i>Provider Gender: Male</i> <i>License Number: 20A7502</i> <i>NPI: 1922041235</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: PIH</i> <i>Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL</i> <i>Board Certified Specialty: No</i></p> <p> 4690 EL CAJON BLVD SAN DIEGO, CA 92115</p>	<p> <i>Phone: (619) 662-4100</i>  <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;">FAMILY PRACTICE</p> <hr/> <p>SOPHY, ELIZABETH <i>Provider ID: 403583</i> <i>Provider Gender: Female</i> <i>License Number: A157547</i> <i>NPI: 1013441203</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i> <i>Board Certified Specialty: No</i></p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101</p> <p> <i>Phone: (619) 233-8500</i>  <i>After Hours Phone: (619) 233-8500</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>
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Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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](http://www.sdfamilycare.org)
.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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM</p>	<p>Board Certified Specialty: No  655 SATURN BLVD STE J SAN DIEGO, CA 92154  Phone: (619) 575-4442  Fax: (619) 575-1297</p>	<p>Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5:30PM</p>
<hr/>		
FAMILY PRACTICE		
<hr/>		
<p>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</p>	<p> 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</p>	<p>WHITE, KATHERINE Provider ID: 227409 Provider Gender: Female License Number: A120447 NPI: 1801112925  Provider English Spoken: Y Cultural Competency: N</p>
<hr/>		
FAMILY PRACTICE		
<hr/>		
<p> 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</p>	<p>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</p>	<p>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</p>
<hr/>		
FAMILY PRACTICE		
<hr/>		
<p>VILLA, MARIA Provider ID: 107710 Provider Gender: Female NPI: 1861541385  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: N</p>	<p>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</p>	<p>WU, JENNIFER Provider ID: 403583</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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.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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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: 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 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 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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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C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<hr/> <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>
<hr/> <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>	<hr/> <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>	<hr/> <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>
	<hr/> <p style="text-align: center;">FQHC</p> <p>SHERMAN HEIGHTS FAMILY HLTH CTRS INC, Provider ID: 356145 NPI: 1174549232 Provider English Spoken: Y</p>	<hr/> <p style="text-align: center;">GASTROENTEROLOGY</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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.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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

Provider English Spoken: Y


Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)

515-2422

 Website: www.fhcsd.org

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-health-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)



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



C. Directorio de atención primaria




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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

 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, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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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C. Directorio de atención primaria

 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: 206046

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 482070

Provider Gender: Male

License Number: A119010

NPI: 1609095264


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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C. Directorio de atención primaria

CHULA VISTA MED CTR, Sharp N
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):

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185268

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

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

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C. Directorio de atención primaria


 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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

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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206360

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

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

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 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

Min/Max Age: 0\None

American Sign Language (ASL):

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

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BLAKE, GARY

Provider ID: 206046

Provider Gender: Male

License Number: G44807


NPI: 1497738439


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

PROVIDER
 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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)

515-2444

Website: www.fhcsd.org

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 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

OBSTETRICS / GYNECOLOGY


CERVANTES, SANDRA

Provider ID: 416831

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL

Board Certified Specialty: No

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

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

CERVANTES, SANDRA

Provider ID: 402851

Provider Gender: Female

License Number: A118095

NPI: 1073701041

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 206363
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
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

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
Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 402851
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
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: 206360
Provider Gender: Female
License Number: A163464

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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


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

 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: 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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><u>OBSTETRICS / GYNECOLOGY</u> DE MIK, TRAVIS <i>Provider ID: 416831</i> <i>Provider Gender: Male</i> <i>License Number: A108228</i> <i>NPI: 1629277322</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i>  3514 30TH ST SAN DIEGO, CA 92104  <i>Phone: (619) 515-2424</i>  <i>After Hours Phone: (619) 515-2424</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><u>OBSTETRICS / GYNECOLOGY</u> DORUELO, ASHLEY <i>Provider ID: 416831</i> <i>Provider Gender: Female</i> <i>License Number: A178499</i> <i>NPI: 1033613732</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS</i></p>	<p><i>MERCY HOSPITAL, Sharp Grossmont Hospital</i> <i>Board Certified Specialty: No</i>  3514 30TH ST SAN DIEGO, CA 92104  <i>Phone: (619) 515-2424</i>  <i>After Hours Phone: (619) 515-2424</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><u>OBSTETRICS / GYNECOLOGY</u> DORUELO, ASHLEY <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: A178499</i> <i>NPI: 1033613732</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS</i> <i>MERCY HOSPITAL, Sharp Grossmont Hospital</i> <i>Board Certified Specialty: No</i>  1809 NATIONAL AVE SAN DIEGO, CA 92113  <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i></p>	<p><i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><u>OBSTETRICS / GYNECOLOGY</u> DORUELO, ASHLEY <i>Provider ID: 206363</i> <i>Provider Gender: Female</i> <i>License Number: A178499</i> <i>NPI: 1033613732</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS</i> <i>MERCY HOSPITAL, Sharp Grossmont Hospital</i> <i>Board Certified Specialty: No</i>  4725 MARKET ST SAN DIEGO, CA 92102  <i>Phone: (619) 515-2560</i>  <i>After Hours Phone: (619) 515-2560</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><u>OBSTETRICS / GYNECOLOGY</u> DORUELO, ASHLEY <i>Provider ID: 402851</i> <i>Provider Gender: Female</i></p>
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Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

**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: 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: 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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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

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

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

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: 206363

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

TH 9:30AM-6PM

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

 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


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
Provider Gender: Female
License Number: A116680

 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

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: 402851

Provider Gender: Female


License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

 *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


LOEFFLER, ALLISON

Provider ID: 206363

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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
 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: 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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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


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: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria


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*

PROVIDER

 *Hours: M-W
8:30AM-5:30PM
TH 9AM-6PM
F 8:30AM-5:30PM*

OBSTETRICS / GYNECOLOGY


STABEN, REBECCA

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: Sharp

Grossmont Hospital

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

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

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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND


HEALTHCARE CTR,


GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org


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: 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)



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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






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: 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

American Sign Language (ASL): Provider ID: 206360

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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 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

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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C. Directorio de atención primaria

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-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): NPI: 1891359154

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

PROVIDER	Provider Gender: Female	Board Certified Specialty: No
PEDIATRICS	License Number: A104918	4060 FAIRMOUNT AVE SAN DIEGO, CA 92105
ABELL, GEOFFREY	NPI: 1588707178	Phone: (619) 255-9155 Fax: (619) 749-5480
Provider ID: 27341	Provider English Spoken: Y	After Hours Phone: (619) 255-9155
Provider Gender: Male	Cultural Competency: N	Website: www.lamaestra.org
NPI: 1245256130	Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR	Medi-Cal Open Panel: Yes
Provider English Spoken: Y	Board Certified Specialty: No	Min/Max Age: 0\None
Cultural Competency: N	4060 FAIRMOUNT AVE SAN DIEGO, CA 92105	American Sign Language (ASL): 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	Phone: (619) 280-4213	Accessibility: CONTACT PROVIDER
Board Certified Specialty: No	After Hours Phone: (619) 280-4213	
292 EUCLID AVE STE 220 SAN DIEGO, CA 92114	Website: www.lamaestra.org	PEDIATRICS
Phone: (619) 262-8624	Medi-Cal Open Panel: Yes	ADLOUNI, LOUBABA
Fax: (619) 262-6639	Min/Max Age: 0\None	Provider ID: 230441
After Hours Phone: (619) 262-8624	American Sign Language (ASL): N	Provider Gender: Female
Website: N/A	Accessibility: CONTACT PROVIDER	NPI: 1669443685
Medi-Cal Open Panel: Yes	Hours: M-F 8AM-6PM SA 8AM-2PM	Provider English Spoken: Y
Min/Max Age: 0\19		Provider Language(s) Spoken: Arabic
American Sign Language (ASL): N	PEDIATRICS	Cultural Competency: N
Accessibility: CONTACT PROVIDER	ADJAN, ROULA	Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Hours: M-F 8AM-5PM	Provider ID: 185268	Board Certified Specialty: No
PEDIATRICS	Provider Gender: Female	16918 DOVE CANYON RD STE 200 SAN DIEGO, CA 92127
ABRAMSON, RACHEL	License Number: A81682	Phone: (858) 924-1960 Fax: (858) 924-1964
Provider ID: 185268	NPI: 1992847263	After Hours Phone: (858) 924-1960
	Provider English Spoken: Y	Website: N/A
	Provider Language(s) Spoken: Arabic, Spanish	
	Cultural Competency: N	

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C. Directorio de atención primaria


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):

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):

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

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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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):

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

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C. Directorio de atención primaria


 *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, 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

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

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)*

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C. Directorio de atención primaria

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria


<p align="center">PEDIATRICS</p> <p>FORTUNE, ERIN <i>Provider ID: 416831</i> <i>Provider Gender: Male</i> <i>License Number: A95577</i> <i>NPI: 1801088422</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL</i> <i>Board Certified Specialty: No</i></p> <p><input type="checkbox"/> 3514 30TH ST SAN DIEGO, CA 92104 <input type="phone"/> <i>Phone: (619) 515-2424</i> <input type="clock"/> <i>After Hours Phone: (619) 515-2424</i> <input type="globe"/> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL): N</i> <input type="wheelchair"/> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Board Certified Specialty: No</i></p> <p><input type="checkbox"/> 16918 DOVE CANYON RD STE 200 SAN DIEGO, CA 92127 <input type="phone"/> <i>Phone: (858) 924-1960</i> <i>Fax: (858) 924-1964</i> <input type="clock"/> <i>After Hours Phone: (858) 924-1960</i> <input type="globe"/> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> <input type="wheelchair"/> <i>Accessibility: CONTACT PROVIDER</i> <input type="clock"/> <i>Hours: M-F 8AM-5PM</i></p>	<p align="center"><i>PROVIDER</i></p> <p><input type="clock"/> <i>Hours: M-F 8AM-5PM</i></p>
<p align="center">PEDIATRICS</p> <p>FRIEDMAN, JAIME <i>Provider ID: 230500</i> <i>Provider Gender: Female</i> <i>NPI: 1144297961</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH</i></p>	<p align="center">PEDIATRICS</p> <p>GOGGIN, SAMANTHA <i>Provider ID: 185268</i> <i>Provider Gender: Female</i> <i>License Number: A163693</i> <i>NPI: 1023506367</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i></p> <p><input type="checkbox"/> 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105 <input type="phone"/> <i>Phone: (619) 255-9154</i> <input type="clock"/> <i>After Hours Phone: (619) 255-9154</i> <input type="globe"/> <i>Website: www.lamaestra.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i> <input type="wheelchair"/> <i>Accessibility: CONTACT</i></p>	<p align="center">PEDIATRICS</p> <p>GRAY, SARAH <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: A151631</i> <i>NPI: 1508210311</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Board Certified Specialty: No</i></p> <p><input type="checkbox"/> 1809 NATIONAL AVE SAN DIEGO, CA 92113 <input type="phone"/> <i>Phone: (619) 515-2300</i> <input type="clock"/> <i>After Hours Phone: (619) 515-2300</i> <input type="globe"/> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i> <input type="wheelchair"/> <i>Accessibility: CONTACT PROVIDER</i> <input type="clock"/> <i>Hours: M 8:30AM-7PM TU-TH 8:30AM-6PM F 8:30AM-5:30PM SA 8:30AM-5PM</i></p>
		<p align="center">PEDIATRICS</p> <p>GUPTA, VARSHA <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: A164889</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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):

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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](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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.







C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

📞 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

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

📄 Provider English Spoken: Y

📄 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

📍 950 S EUCLID AVE
SAN DIEGO, CA 92114

📞 Phone: (619) 662-4100

📞 After Hours Phone: (619)
662-4100

🌐 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-4PM

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

RUBENSTEIN, STUART

Provider ID: 521305

Provider Gender: Male

NPI: 1689633844

📄 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,

SCRIPPS MEMORIAL

HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No

📍 11943 EL CAMINO REAL
STE 210

SAN DIEGO, CA 92130

📞 Phone: (858) 793-1011

Fax: (858) 793-1035

📞 After Hours Phone: (858)
793-1011

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 8AM-5PM
SA 8AM-0PM

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 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: 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

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



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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)
515-2525

Website: www.fhcsd.org

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

After Hours Phone: (619)
515-2435

Website: N/A

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria







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*

.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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Persian, Spanish*


Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 *Phone: (619) 280-2058*

 *After Hours Phone: (619) 280-2058*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS


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):

 *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):

 *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):

 *Accessibility: CONTACT PROVIDER*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 Hours: M-F 8AM-6PM
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider English Spoken: Y
Cultural Competency: 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: 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

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

LANDIS, SARAH

Provider ID: 417782

Provider Gender: Female

License Number: PA58826

NPI: 1144733676

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

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C. Directorio de atención primaria

MEMORIAL HOSPITAL

Board Certified Specialty: No

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

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: 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

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

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752

NPI: 1487307369


Provider English Spoken: Y


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C. Directorio de atención primaria

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

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: 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

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

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

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C. Directorio de atención primaria

License Number: PA21625

NPI: 1154609790


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org


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-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

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C. Directorio de atención primaria

🕒 *Hours: M 8AM-5PM
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.syhe
alth.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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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

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

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C. Directorio de atención primaria




 *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

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

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




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

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C. Directorio de atención primaria

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: 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: 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

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

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA


Provider ID: 206046
Provider Gender: Female
License Number: G41532

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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


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: 482070

Provider Gender: Female

License Number: G41532

NPI: 1467434811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish


Cultural Competency: N


Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

.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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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

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C. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): N

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): N

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


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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>PROVIDER</p>	<p>4094 4TH AVE SAN DIEGO, CA 92103</p>	<p>PROVIDER</p>
<p>REGISTERED PHYSICAL THERAPIST</p>	<p>Phone: (619) 515-2545 After Hours Phone: (619) 515-2545</p>	<p>REGISTERED PHYSICAL THERAPIST</p>
<p>MAHONEY, KAITLYN Provider ID: 417937 Provider Gender: Female License Number: PT296559 NPI: 1114583176 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p>	<p>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</p>	<p>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</p>
<p>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</p>	<p>REGISTERED PHYSICAL THERAPIST</p> <p>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</p>	<p>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</p>
<p>REGISTERED PHYSICAL THERAPIST</p>	<p>4094 4TH AVE SAN DIEGO, CA 92103</p>	<p>RHEUMATOLOGY</p>
<p>MIGNEA, DAVID Provider ID: 417937 Provider Gender: Male License Number: PT293536 NPI: 1043736879 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p>	<p>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</p>	<p>OGANDO, SHEENA Provider ID: 206363 Provider Gender: Female License Number: A142743 NPI: 1649564295 Provider English Spoken: Y Provider Language(s)</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria


Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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 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



BINETTE, DONYA


Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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 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



DOAN, CHINH

Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069

Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N



Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




C. Directorio de atención primaria



 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 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**

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
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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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C. Directorio de atención primaria

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

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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

CERTIFIED NURSE PRACTITIONER

FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

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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

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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

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

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C. Directorio de atención primaria

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


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 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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 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


KOUSARI, JHALEH

Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 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 VALPRED A RD
SAN MARCOS, CA 92069

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 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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C. Directorio de atención primaria

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 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): 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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 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

Board Certified Specialty: No
N

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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 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): 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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C. Directorio de atención primaria

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


CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER



Board Certified Specialty: No

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 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

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
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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



CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426



Provider Gender: Female


License Number: NM235997
NPI: 1801134275

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

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 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No



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C. Directorio de atención primaria

 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



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
 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

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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 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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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
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
 Hours: M-F 8AM-5PM
SA 8AM-5PM

FAMILY PRACTICE

NATH, DEVARSHI

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C. Directorio de atención primaria

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

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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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Min/Max Age: 0\None

American Sign Language (ASL):
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FAMILY PRACTICE

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Provider ID: 206426

Provider Gender: Male

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NPI: 1275630618


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Provider Language(s)
Spoken: Bengali

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):
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 Accessibility: CONTACT
PROVIDER

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FAMILY PRACTICE

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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

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C. Directorio de atención primaria

SAN MARCOS, CA 92078
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Fax: (760) 736-6744
🕒 After Hours Phone: (760) 736-6767
🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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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🌐 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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🌐 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 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. Directorio de atención primaria


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
 Provider Gender: Male
 License Number: 20A17306
 NPI: 1790133767
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Portuguese
 Cultural Competency: N
 Board Certified Specialty: No
 150 VALPRED A RD
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 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: 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
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767

Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-5PM

FQHC

TRUECARE,
 Provider ID: 206426
 NPI: 1811617939
 Provider English Spoken: Y
 Cultural Competency: N
 150 VALPRED A RD
 SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-8740
 After Hours Phone: (760)
 736-6767
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 SA 8AM-5PM


FQHC

TRUECARE,
 Provider ID: 206426


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

NPI: 1598484255

 Provider English Spoken: Y
Cultural Competency: N

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\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)
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: 614511

NPI: 1811617939

 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

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

 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

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

 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

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C. Directorio de atención primaria

 *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

 *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


 *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


 *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


 *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*

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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

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

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

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

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

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female


License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


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C. Directorio de atención primaria

 *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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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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C. Directorio de atención primaria

<p style="text-align: center;"><u>PEDIATRICS</u></p> <p>MATIAS, JULIE Provider ID: 661065 Provider Gender: Female NPI: 1083094510</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> 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767 Fax: (760) 736-6797 <input type="radio"/> 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 <input type="radio"/> Hours: M-F 8AM-5PM</p>	<p>Board Certified Specialty: Yes</p> <p> 1582 W SAN MARCOS BLVD STE 203 SAN MARCOS, CA 92078  Phone: (760) 744-6710 Fax: (760) 744-6156 <input type="radio"/> 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 <input type="radio"/> Hours: M-F 8AM-5PM</p>	<p>Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>
<p style="text-align: center;"><u>PEDIATRICS</u></p> <p>MONAHAN, CAROLYN Provider ID: 50425 Provider Gender: Female NPI: 1619973666</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: PALOMAR MEDICAL CENTER</p>	<p style="text-align: center;"><u>PEDIATRICS</u></p> <p>POSADAS, EMERITO Provider ID: 206426 Provider Gender: Male License Number: A48980 NPI: 1720093198</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER Board Certified Specialty: No</p> <p> 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767 <input type="radio"/> After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes</p>	<p style="text-align: center;"><u>PEDIATRICS</u></p> <p>POSADAS, EMERITO Provider ID: 206426 Provider Gender: Male License Number: A48980 NPI: 1720093198</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER Board Certified Specialty: No</p> <p> 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767 <input type="radio"/> 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</p>
<p style="text-align: center;"><u>PEDIATRICS</u></p> <p>POSADAS, EMERITO Provider ID: 206426 Provider Gender: Male</p>	<p style="text-align: center;"><u>PEDIATRICS</u></p> <p>POSADAS, EMERITO Provider ID: 206426 Provider Gender: Male</p>	<p style="text-align: center;"><u>PEDIATRICS</u></p> <p>POSADAS, EMERITO Provider ID: 206426 Provider Gender: Male</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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: 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

QUINTERO, CAROLYN

Provider ID: 614767

Provider Gender: Female

NPI: 1023033156

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

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 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

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female


License Number: G71182

NPI: 1740295229




Provider English Spoken: Y


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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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C. Directorio de atención primaria

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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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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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

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

License Number: PA22667

NPI: 1174964001


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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 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

License Number: PA22667

NPI: 1174964001


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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 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

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male


License Number: PA17101


NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

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 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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C. Directorio de atención primaria

PHYSICIANS ASSISTANT


KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male


License Number: PA17101


NPI: 1316947302

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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 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

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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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

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

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C. Directorio de atención primaria

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

 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


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

 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




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C. Directorio de atención primaria

 *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*

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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C. Directorio de atención primaria

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):

 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

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C. Directorio de atención primaria

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



C. Directorio de atención primaria



 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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C. Directorio de atención primaria

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

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

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

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C. Directorio de atención primaria

Min/Max Age: 0\None

American Sign Language (ASL): License Number: A138474

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

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

Provider Gender: Female

License Number: A138474

NPI: 1427475318

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


CARRIEDO CENICEROS, MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A78373


NPI: 1295746618


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE

Provider ID: 206292

Provider Gender: Female


License Number: A159673


NPI: 1902330723


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

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C. Directorio de atención primaria

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/s/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


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C. Directorio de atención primaria

<p>FAMILY PRACTICE</p> <p>ESTRADA, JOHANNA Provider ID: 206292 Provider Gender: Female License Number: A127188 NPI: 1255698155</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL 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 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</p>	<p>Provider ID: 206292 Provider Gender: Female License Number: A125329 NPI: 1780979120</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL 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 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</p>	<p>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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p>
<p>FAMILY PRACTICE</p> <p>HEINRICI, ALEKA</p>	<p>FAMILY PRACTICE</p> <p>HENDRIX, JEFFERSON Provider ID: 227469 Provider Gender: Male License Number: A32571 NPI: 1235142738</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>HERNANDEZ, RALPH Provider ID: 227469 Provider Gender: Male License Number: C42207 NPI: 1285782151</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> 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</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<i>PROVIDER</i>	<i>Hospital Affiliation: SCRIPPS</i>	<i>Medi-Cal Open Panel: Yes</i>
<u>FAMILY PRACTICE</u>	<i>MERCY HOSPITAL CHULA VISTA</i>	<i>Min/Max Age: 0\None</i>
HERNANDEZ, RALPH	<i>Board Certified Specialty: No</i>	<i>American Sign Language (ASL): N</i>
<i>Provider ID: 206292</i>	 <i>4004 BEYER BLVD</i>	 <i>Accessibility: CONTACT PROVIDER</i>
<i>Provider Gender: Male</i>	<i>SAN YSIDRO, CA 92173</i>	 <i>Hours: SU 10AM-4PM</i>
<i>License Number: C42207</i>	 <i>Phone: (619) 662-4100</i>	<i>M-F 8:30AM-5:30PM</i>
<i>NPI: 1285782151</i>	 <i>After Hours Phone: (619) 662-4100</i>	<i>SA 8AM-2:30PM</i>
 <i>Provider English Spoken: Y</i>	 <i>Website: www.syhealth.org</i>	
 <i>Provider Language(s) Spoken: Spanish</i>	<i>/clinics/san- ysidro- health - center</i>	
<i>Cultural Competency: N</i>	<i>Medi-Cal Open Panel: Yes</i>	<u>FAMILY PRACTICE</u>
<i>Board Certified Specialty: No</i>	<i>Min/Max Age: 0\None</i>	LEE, JOSEPH
 <i>4004 BEYER BLVD</i>	<i>American Sign Language (ASL): N</i>	<i>Provider ID: 206292</i>
<i>SAN YSIDRO, CA 92173</i>	 <i>Accessibility: CONTACT PROVIDER</i>	<i>Provider Gender: Male</i>
 <i>Phone: (619) 662-4100</i>		<i>License Number: A164201</i>
 <i>After Hours Phone: (619) 662-4100</i>		<i>NPI: 1417480948</i>
 <i>Website: www.syhealth.org</i>		 <i>Provider English Spoken: Y</i>
<i>/clinics/san- ysidro- health - center</i>		<i>Cultural Competency: N</i>
<i>Medi-Cal Open Panel: Yes</i>	<u>FAMILY PRACTICE</u>	<i>Hospital Affiliation: ST ELIZABETH HOSP</i>
<i>Min/Max Age: 0\None</i>	LARA, LESLEY	<i>Board Certified Specialty: No</i>
<i>American Sign Language (ASL): N</i>	<i>Provider ID: 206292</i>	 <i>4004 BEYER BLVD</i>
 <i>Accessibility: CONTACT PROVIDER</i>	<i>Provider Gender: Female</i>	<i>SAN YSIDRO, CA 92173</i>
	<i>License Number: A173435</i>	 <i>Phone: (619) 662-4100</i>
	<i>NPI: 1184112682</i>	<i>Fax: (619) 205-6341</i>
	 <i>Provider English Spoken: Y</i>	 <i>After Hours Phone: (619) 662-4100</i>
	 <i>Provider Language(s) Spoken: Spanish</i>	 <i>Website: www.syhealth.org</i>
	<i>Cultural Competency: N</i>	<i>/clinics/san- ysidro- health - center</i>
	<i>Board Certified Specialty: No</i>	<i>Medi-Cal Open Panel: Yes</i>
<u>FAMILY PRACTICE</u>	 <i>4004 BEYER BLVD</i>	<i>Min/Max Age: 0\None</i>
KAUFHOLD, ANNE	<i>SAN YSIDRO, CA 92173</i>	<i>American Sign Language (ASL): N</i>
<i>Provider ID: 206292</i>	 <i>Phone: (619) 662-4100</i>	 <i>Accessibility: CONTACT PROVIDER</i>
<i>Provider Gender: Female</i>	 <i>After Hours Phone: (619) 662-4100</i>	 <i>Hours: M-F 8AM-5:30PM</i>
<i>License Number: A88893</i>	 <i>Website: www.syhealth.org</i>	
<i>NPI: 1164508073</i>	<i>/clinics/san- ysidro- health - center</i>	
 <i>Provider English Spoken: Y</i>		
 <i>Provider Language(s) Spoken: Arabic, Spanish</i>		
<i>Cultural Competency: N</i>		

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C. Directorio de atención primaria

SA 8:30AM-2PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 227469

Provider Gender: Male

License Number: A164201

NPI: 1417480948

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No

3364 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8AM-5PM

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


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C. Directorio de atención primaria

- center
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



NAVARRO, VANESSA

Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No

 3364 BEYER BLVD
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

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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C. Directorio de atención primaria

 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

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C. Directorio de atención primaria

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.syhealth.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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C. Directorio de atención primaria

 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. Directorio de atención primaria

 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

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. Directorio de atención primaria

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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C. Directorio de atención primaria

 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


C. Directorio de atención primaria

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

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C. Directorio de atención primaria

 *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
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*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <hr/> <p>INTERNAL MEDICINE</p> <p>HURST, MICHAEL Provider ID: 206292 Provider Gender: Male License Number: 20A8081 NPI: 1205893104</p> <p> 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</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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-8PM SA 8AM-2PM</p> <hr/> <p>INTERNAL MEDICINE</p> <p>KAUFER, DAVID</p>	<p>Provider ID: 206292 Provider Gender: Male License Number: G80107 NPI: 1710082789</p> <p> Provider English Spoken: Y 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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5:30PM SA 8:30AM-2PM</p> <hr/> <p>INTERNAL MEDICINE</p> <p>KAUFER, DAVID Provider ID: 227469 Provider Gender: Male License Number: G80107 NPI: 1710082789</p> <p> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No</p> <p> 3364 BEYER BLVD SAN YSIDRO, CA 92173  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100</p>	<p> Website: https://www.syhealth.org/locations Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <hr/> <p>INTERNAL MEDICINE</p> <p>LAMANTIA, MICHELE Provider ID: 206292 Provider Gender: Female License Number: G71855 NPI: 1124176102</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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <hr/> <p>INTERNAL MEDICINE</p> <p>MAY, LOUIS Provider ID: 206292</p>
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Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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: 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-](http://syhealth.org/clinics/maternal-child-health-center)

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: 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

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



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C. Directorio de atención primaria







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: 227411
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
 4050 BEYER BLVD
 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY
Provider ID: 206292
Provider Gender: Female

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C. Directorio de atención primaria


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

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

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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

/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](http://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](http://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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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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. Directorio de atención primaria

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. Directorio de atención primaria

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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

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C. Directorio de atención primaria

 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

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C. Directorio de atención primaria

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


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C. Directorio de atención primaria






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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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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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C. Directorio de atención primaria

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

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

DE MIK, TRAVIS

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

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

 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

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

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C. Directorio de atención primaria

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,*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria



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

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C. Directorio de atención primaria

 *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: 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*

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C. Directorio de atención primaria

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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria








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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

C. Directorio de atención primaria

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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.









C. Directorio de atención primaria

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






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C. Directorio de atención primaria

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas


 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

Medi-Cal Open 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. Directorio de proveedores especialistas

 *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. Directorio de proveedores especialistas

 *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. Directorio de proveedores especialistas

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: 295830
Board Certified Specialty: No
 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911

 Phone: (619) 421-3361
Fax: (619) 869-4378

 After Hours Phone: (619)
421-3361

Provider Gender: Female
NPI: 1508370875

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\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: 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

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D. Directorio de proveedores especialistas


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,

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


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


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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D. Directorio de proveedores especialistas

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 AVESTE A
CHULA VISTA, CA 91911

 Phone: (619) 662-4100

Fax: (619) 618-2035

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1821331174

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

<p>ENDOCRINOLOGY METABOLISM DIABETES</p> <p>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</p>	<p>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</p>	<p>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>FAMILY PRACTICE</p> <p>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</p>	<p>FAMILY PRACTICE</p> <p>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</p>	<p>FAMILY PRACTICE</p> <p>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</p>

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D. Directorio de proveedores especialistas

<p style="text-align: center;"><u>FAMILY PRACTICE</u></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 style="text-align: center;"><u>FAMILY PRACTICE</u></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 style="text-align: center;"><u>GASTROENTEROLOGY</u></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 style="text-align: center;"><u>GASTROENTEROLOGY</u></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. Directorio de proveedores especialistas

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):

 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. Directorio de proveedores especialistas

 Provider English 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: 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

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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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, ULADZISLAU

Provider ID: 290568

Board Certified Specialty: No

750 MEDICAL CENTER CT
STE 9

CHULA VISTA, CA 91911

Phone: (619) 421-6922

Fax: (619) 421-5569

After Hours Phone: (619)
421-6922

Provider Gender: Male

NPI: 1023246212

Provider English Spoken: Y

Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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

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
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Community Care IPA LLC

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302985
Board Certified Specialty: No
 754 MEDICAL CENTER CT
 STE 101
 CHULA VISTA, CA 91911
 Phone: (619) 434-4288
Fax: (619) 434-4315
 After Hours Phone: (619) 434-4288
Provider Gender: Male
NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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: 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,


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas




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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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-PPH

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. Directorio de proveedores especialistas

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

MATOBANA, 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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D. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL 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. Directorio de proveedores especialistas

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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):

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D. Directorio de proveedores especialistas

<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 9AM-5PM</i>  <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></p>	<p><i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD</i></p>	<p><i>Imperial Health Holdings Medical Group-SD</i></p>
NEPHROLOGY		
<p>VIDEEN, JOHN <i>Provider ID: 65646</i> <i>Board Certified Specialty: No</i>  752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911  <i>Phone: (619) 421-3361</i> <i>Fax: (619) 869-4378</i>  <i>After Hours Phone: (619) 421-3361</i> <i>Provider Gender: Male</i> <i>NPI: 1043318199</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PARADISE VALLEY HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 18\None</i> <i>American Sign Language (ASL): N</i></p>	<p>VIDEEN, JOHN <i>Provider ID: 290110</i> <i>Board Certified Specialty: No</i>  752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911  <i>Phone: (619) 421-3361</i> <i>Fax: (619) 869-4378</i>  <i>After Hours Phone: (619) 421-3361</i> <i>Provider Gender: Male</i> <i>NPI: 1043318199</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PARADISE VALLEY HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p>	<p style="text-align: center;">NEPHROLOGY</p> <p>VIDEEN, JOHN <i>Provider ID: 262286</i> <i>Board Certified Specialty: No</i>  752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911  <i>Phone: (619) 421-3361</i> <i>Fax: (619) 869-4378</i>  <i>After Hours Phone: (619) 421-3361</i> <i>Provider Gender: Male</i> <i>NPI: 1043318199</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PARADISE VALLEY HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p>
<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 9AM-5PM</i>  <i>Website: N/A</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 9AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP,</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 9AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD</i></p>







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D. Directorio de proveedores especialistas

NEPHROLOGY		YUAN, HENRY Provider ID: 268551 Board Certified Specialty: No 340 4TH AVE STE 4 CHULA VISTA, CA 91910 Phone: (619) 427-1144 Fax: (619) 427-1185 After Hours Phone: (619) 427-1144 Provider Gender: Male NPI: 1043442379 Provider English Spoken: Y Provider Language(s) Spoken: Chinese, Mandarin Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL, Providence St Joseph Hospital, Providence St Jude Medical Center, SOUTH COAST GLOBAL MEDICAL CENTER INC, ENCOMPASS HEALTH REHABILITATION HOSPITAL OF TUSTIN, Foothill Regional Medical Center, Foothill Regional Medical Center, KINDRED HOSPITAL BREA, KINDRED HOSPITAL LA MIRADA, KINDRED HOSPITAL SANTA ANA Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	N Accessibility: CONTACT PROVIDER Hours: M-F 9AM-5PM Website: N/A IPA: Community Care IPA LLC	Provider ID: 127244 Board Certified Specialty: No 750 MEDICAL CENTER CT STE 6 CHULA VISTA, CA 91911 Phone: (619) 337-7900 Fax: (619) 337-7902 After Hours Phone: (619) 337-7900 Provider Gender: Male NPI: 1902973472 Provider English Spoken: Y Provider Language(s) Spoken: Arabic, Farsi, French, German, Pushto, Spanish Cultural Competency: N Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):
NEUROLOGY		HOSSEIN ZADEH MALEKI, ANA Provider ID: 304999 Board Certified Specialty: No 450 FOURTH AVESTE 215 CHULA VISTA, CA 91910 Phone: (619) 425-3840 Fax: (619) 485-5440 After Hours Phone: (619) 425-3840 Provider Gender: Female NPI: 1316471485 Provider English Spoken: Y Provider Language(s) Spoken: Arabic, Persian Cultural Competency: N Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):	N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: IHP of Southern Cal-PHP	N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC
NEUROLOGY		MOHAMMAD, AHMAD SHAH	SORIA LOPEZ, JOSE Provider ID: 295744 Board Certified Specialty: No	


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D. Directorio de proveedores especialistas

 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: 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

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




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):


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D. Directorio de proveedores especialistas






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: 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
 *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: 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

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*

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D. Directorio de proveedores especialistas

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: 304537

Board Certified Specialty: No

📍 835 THIRD AVESTE 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

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

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

🕒 Hours: M-F 9AM-6PM

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D. Directorio de proveedores especialistas

 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
 PROVIDER

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D. Directorio de proveedores especialistas

 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 AVESTE 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

MCCALLION, PATRICK

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D. Directorio de proveedores especialistas

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

CHILDRENS HOSPITAL SAN

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D. Directorio de proveedores especialistas

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

 Phone: (858) 966-1720

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D. Directorio de proveedores especialistas

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

American Sign Language (ASL):

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D. Directorio de proveedores especialistas

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Rady Childrens Health Network</i></p>	<p><i>Provider ID: 295275</i></p> <p><i>Board Certified Specialty: No</i></p> <p> <i>340 4TH AVE STE 19 CHULA VISTA, CA 91910</i></p> <p> <i>Phone: (760) 607-5350</i></p> <p><i>Fax: (760) 607-5365</i></p> <p> <i>After Hours Phone: (760) 607-5350</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1407052459</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 18\None</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p><i>Provider Gender: Female</i></p> <p><i>NPI: 1477129302</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 18\None</i></p> <p><i>American Sign Language (ASL): N</i></p>
<hr/> <p>PEDIATRICS</p> <hr/> <p>ROWHANI, NAGHMEH</p> <p><i>Provider ID: 306065</i></p> <p><i>Board Certified Specialty: No</i></p> <p> <i>280 E ST CHULA VISTA, CA 91910</i></p> <p> <i>Phone: (619) 662-4100</i></p> <p><i>Fax: (619) 426-2170</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1992876759</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\17</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 18\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: IHP of Southern Cal-PHP</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: IHP of Southern Cal-PHP</i></p>
<hr/> <p>PHYSICAL MEDICINE / REHABILITATION</p> <hr/> <p>RICHARDSON, HENRY</p>	<hr/> <p>PHYSICIANS ASSISTANT</p> <hr/> <p>BEITTER, KEERSTIN</p> <p><i>Provider ID: 300093</i></p> <p><i>Board Certified Specialty: No</i></p> <p> <i>340 4TH AVE STE 19 CHULA VISTA, CA 91910</i></p> <p> <i>Phone: (619) 761-5308</i></p> <p><i>Fax: (619) 591-1910</i></p> <p> <i>After Hours Phone: (619) 761-5308</i></p>	<hr/> <p>PHYSICIANS ASSISTANT</p> <hr/> <p>DOUGHERTY, CLARA</p> <p><i>Provider ID: 301592</i></p> <p><i>Board Certified Specialty: No</i></p> <p> <i>752 MEDICAL CENTER CT STE 101 CHULA VISTA, CA 91911</i></p> <p> <i>Phone: (619) 397-4500</i></p> <p><i>Fax: (858) 429-7931</i></p> <p> <i>After Hours Phone: (619) 397-4500</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1609987619</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</i></p>

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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: 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

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

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. Directorio de proveedores especialistas

 *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. Directorio de proveedores especialistas

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


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): Board Certified Specialty: No
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): Board Certified Specialty: No
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): Board Certified Specialty: No
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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas



Cultural Competency: 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: 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

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

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


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D. Directorio de proveedores especialistas

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: 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

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

JAIN, ALEXANDRA

Provider ID: 305150

Board Certified Specialty: No

 880 THIRD AVESTE 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: 287100

Board Certified Specialty: No

 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913


 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes




Min/Max Age: 16\None

American Sign Language (ASL):

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D. Directorio de proveedores especialistas

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: 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):


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

NGUYEN, TIA

Provider ID: 305014
Board Certified Specialty: No
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913
 *Phone: (619) 482-3000*
Fax: (619) 482-3001
 *After Hours Phone: (619) 482-3000*



Provider Gender: Female
NPI: 1457136269
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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: 305013
Board Certified Specialty: No
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913
 *Phone: (619) 482-3000*
Fax: (619) 482-3001
 *After Hours Phone: (619)*

482-3000



Provider Gender: Female
NPI: 1457136269
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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: 301994
Board Certified Specialty: No
 1392 E PALOMAR ST STE 503
 CHULA VISTA, CA 91913
 *Phone: (619) 482-3000*
Fax: (619) 482-3001
 *After Hours Phone: (619) 482-3000*
Provider Gender: Male
NPI: 1447723937
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL):

N





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D. Directorio de proveedores especialistas

 *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: 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*

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D. Directorio de proveedores especialistas







Cultural Competency: 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: 305424
 Board Certified Specialty: No
 1392 E PALOMAR ST STE
 503
 CHULA VISTA, CA 91913
 Phone: (619) 482-3000
 Fax: (619) 482-3001
 After Hours Phone: (619)
 482-3000
 Provider Gender: Male
 NPI: 1760194302
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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

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


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D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


<p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish, Tagalog</i> <i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TH 8AM-5PM F 8AM-4PM</i></p> <p> <i>Website: N/A</i> <i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</i></p>	<p><i>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</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></p>	<p><i>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</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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


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

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




D. Directorio de proveedores especialistas

<p>INTERNAL MEDICINE</p> <p>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</p>	<p>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</p>	<p>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</p>
<p>INTERNAL MEDICINE</p> <p>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)</p>	<p>INTERVENTIONAL CARDIOLOGY</p> <p>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</p>	<p>INTERVENTIONAL CARDIOLOGY</p> <p>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</p>

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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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


N

Min/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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D. Directorio de proveedores especialistas

IPA: UCSD Medical Group

SURGERY NEUROLOGICAL

BARBA, DAVID

Provider ID: 244089

Board Certified Specialty: No

1200 GARDEN VIEW RD
ENCINITAS, CA 92243

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. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas




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: 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

RUBENZIK, TAMARA

Provider ID: 282127
Board Certified Specialty: No
 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1811200652


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

DIEGO, 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

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

 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

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: 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








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D. Directorio de proveedores especialistas

 *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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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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: 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

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: 293448

Board Certified Specialty: No


1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8372

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D. Directorio de proveedores especialistas

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


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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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

<p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>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</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> <i>Accessibility: CONTACT PROVIDER</i> <i>Hours: M-F 8AM-5PM</i> <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p><i>CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> <i>Accessibility: CONTACT PROVIDER</i> <i>Hours: M-F 8AM-5PM</i> <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network, UCSD Medical Group</i></p>	<p><i>N</i> <i>Accessibility: CONTACT PROVIDER</i> <i>Hours: M-F 8AM-5PM</i> <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>
OPHTHALMOLOGY		
<p>MOVAGHAR, MANSOOR <i>Provider ID: 216413</i> <i>Board Certified Specialty: No</i> 477 N EL CAMINO REAL BLD D STE 302 ENCINITAS, CA 92024 <i>Phone: (760) 944-5545</i> <i>After Hours Phone: (760) 944-5545</i> <i>Provider Gender: Male</i> <i>NPI: 1497792220</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY</i></p>	<p>OPHTHALMOLOGY</p> <p>OHALLORAN, HENRY <i>Provider ID: 205886</i> <i>Board Certified Specialty: No</i> 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024 <i>Phone: (760) 944-5545</i> <i>Fax: (760) 944-3927</i> <i>After Hours Phone: (760) 944-5545</i> <i>Provider Gender: Male</i> <i>NPI: 1235287947</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL):</i></p>	<p>OPTOMETRIST</p> <p>AOTO, KIM <i>Provider ID: 296797</i> <i>Board Certified Specialty: No</i> 320 SANTA FE DR STE 104 ENCINITAS, CA 92024 <i>Phone: (760) 943-7141</i> <i>Fax: (760) 943-0371</i> <i>After Hours Phone: (760) 943-7141</i> <i>Provider Gender: Female</i> <i>NPI: 1780935650</i> <i>Provider English Spoken: Y</i> <i>Provider Language(s) Spoken: Vietnamese</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i> <i>Accessibility: CONTACT PROVIDER</i> <i>Hours: M 9AM-5PM TU 8:30AM-4:30PM W 7:30AM-4:30PM TH 9:30AM-5PM F 8:30AM-4PM</i> <i>Website: N/A</i> <i>IPA: Community Care IPA LLC, IHP of Southern Cal-PHP</i></p>

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas


Hospital Affiliation: RADY
CHILDRENS HOSPITAL 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,

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


Medi-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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): N

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

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

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

N

Accessibility: CONTACT PROVIDER


























Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

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D. Directorio de proveedores especialistas

<p>INTERNAL MEDICINE</p> <p>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</p>	<p>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</p>	<p>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</p>
<p>INTERNAL MEDICINE</p> <p>MALEK, MIKHAIL Provider ID: 296831 Board Certified Specialty: No  2130 CITRACADO PKWYSTE 220 ESCONDIDO, CA 92029  Phone: (760) 743-0546</p>	<p>INTERVENTIONAL CARDIOLOGY</p> <p>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</p>	<p>INTERVENTIONAL CARDIOLOGY</p> <p>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</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas





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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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: 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: 277040

Board Certified Specialty: No

 1955 CITRACADO PKWY
STE 302

ESCONDIDO, CA 92029

 Phone: (760) 233-1896

 After Hours Phone: (760)
233-1896

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 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


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. Directorio de proveedores especialistas

☎ 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

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

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

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. Directorio de proveedores especialistas

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

OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 277824

Board Certified Specialty: No

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Provider Gender: Female


NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  Accessibility: CONTACT PROVIDER

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

OPHTHALMOLOGY


MOLL, ANGELA


Provider ID: 205895

Board Certified Specialty: No

 625 CITRACADO PKWY STE 206

ESCONDIDO, CA 92025

 Phone: (760) 755-7600

 After Hours Phone: (760) 755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group

OPHTHALMOLOGY

Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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

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D. Directorio de proveedores especialistas

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: 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

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: 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




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D. Directorio de proveedores especialistas



 *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: 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. Directorio de proveedores especialistas


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: 277867

Board Certified Specialty: No

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260

Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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




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D. Directorio de proveedores especialistas

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

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

☎ 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. Directorio de proveedores especialistas








 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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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

 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: 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas


 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

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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas


 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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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas


 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: 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

JIMENEZ, ANDREA

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D. Directorio de proveedores especialistas

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

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

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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

☎ 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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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

ARELLANO, JACQUELINE

Provider ID: 304140

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas


 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. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *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 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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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: 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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 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

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

 *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: 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*
 *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*

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D. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas

<p><u>CERTIFIED REGISTERED NURSE ANESTHETIST</u></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><u>CERTIFIED REGISTERED NURSE ANESTHETIST</u></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><u>CERTIFIED REGISTERED NURSE ANESTHETIST</u></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><u>CERTIFIED REGISTERED NURSE ANESTHETIST</u></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  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p> <p><u>CERTIFIED REGISTERED NURSE ANESTHETIST</u></p> <p>FERRITER, STACY Provider ID: 265296</p>

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D. Directorio de proveedores especialistas

Board Certified Specialty: No

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. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas

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):

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: 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

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

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)

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D. Directorio de proveedores especialistas

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: 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

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

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

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

 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


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: 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

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D. Directorio de proveedores especialistas

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242545

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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

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

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

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

EMERGENCY MEDICINE

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D. Directorio de proveedores especialistas

HORNBEAK, KIRSTEN

Provider ID: 240023

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205214442

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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

IPA: UCSD Medical Group

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

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D. Directorio de proveedores especialistas

 Website: N/A
 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

 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): IPA: UCSD Medical Group

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

IPA: UCSD Medical Group


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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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

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: 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

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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: 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


Medi-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: 300025

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas






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: 275069
 Board Certified Specialty: No
 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: 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: 275070
 Board Certified Specialty: No
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas

<p>INTERNAL MEDICINE</p> <p>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</p>	<p> 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</p>	<p>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>KATZ, YISRAEL Provider ID: 272937 Board Certified Specialty: No  9300 CAMPUS POINT DR LA JOLLA, CA 92037  Phone: (800) 926-8273</p>	<p>INTERNAL MEDICINE</p> <p>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</p>	<p>INTERNAL MEDICINE</p> <p>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</p>

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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

<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>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas









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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

<p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p><i>THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p><i>CENTRO REGIONAL MEDICAL CENTER</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>
<hr/>		
<p><u>INTERVENTIONAL</u> <u>CARDIOLOGY</u></p>	<p><u>INTERVENTIONAL</u> <u>CARDIOLOGY</u></p>	<p><u>INTERVENTIONAL</u> <u>CARDIOLOGY</u></p>
<p>AL KHIAMI, BELAL <i>Provider ID: 275993</i> <i>Board Certified Specialty: No</i>  9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037  <i>Phone: (858) 657-8530</i>  <i>After Hours Phone: (858) 657-8530</i> <i>Provider Gender: Male</i> <i>NPI: 1861623506</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Arabic</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY</i></p>	<p>CRUZ RODRIGUEZ, JOSE <i>Provider ID: 300062</i> <i>Board Certified Specialty: No</i>  9434 MEDICAL CENTER DR LA JOLLA, CA 92037  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Male</i> <i>NPI: 1457770240</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL</i></p>	<p>DAMANI, SAMIR <i>Provider ID: 303097</i> <i>Board Certified Specialty: No</i>  9850 GENESEE AVE STE 650 LA JOLLA, CA 92037  <i>Phone: (858) 800-2480</i> <i>Fax: (858) 216-1908</i>  <i>After Hours Phone: (858) 800-2480</i> <i>Provider Gender: Male</i> <i>NPI: 1457379372</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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: 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


D. Directorio de proveedores especialistas

Min/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):
N

 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):

N

 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. Directorio de proveedores especialistas

 *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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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*




MATERNAL AND FETAL MEDICINE

NEONATAL / PERINATAL MEDICINE




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):

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):

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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: 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

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

MATоба, 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

IPA: Rady Childrens Health Network

NEONATAL / PERINATAL MEDICINE


MATOBÁ, 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


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301824

Board Certified Specialty: No

 9888 GENESEE AVE
LA JOLLA, CA 92037

 *Phone: (858) 626-4123*

Fax: (760) 633-7998

 *After Hours Phone: (858) 626-4123*

Provider Gender: Female

NPI: 1003260951

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 *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





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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*

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D. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas


 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: 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

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

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

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D. Directorio de proveedores especialistas

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: 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

MELLENDEZ, ARIANA

Provider ID: 299920

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

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: 299977

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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

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D. Directorio de proveedores especialistas

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1841722485
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UNIVERSITY HSP
OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 16\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 AVESTE
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

SUYAMA, JULIE

Provider ID: 284289

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

IPA: UCSD Medical Group

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


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D. Directorio de proveedores especialistas

LA JOLLA, CA 92093
 Phone: (858) 534-6290
 Fax: (888) 539-8781
 After Hours Phone: (858) 534-6290
 Provider Gender: Female
 NPI: 1912325184
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA
 JOLLA JOHN SALLY
 THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

 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: 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: 300041

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699268292

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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


OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299937

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932605649


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP, UCSD Medical Group


OPHTHALMOLOGY

SONG, DELU

Provider ID: 284425

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1437689536

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, UCSD MEDICAL


CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

TOPILOW, NICOLE

Provider ID: 284348

Board Certified Specialty: No

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1215468376

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

OPTOMETRIST


AOTO, KIM

Provider ID: 296798

Board Certified Specialty: No

 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

 Phone: (800) 898-2020

Fax: (844) 897-3788

 After Hours Phone: (800) 898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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-4:15PM

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

IPA: UCSD Medical Group

OPTOMETRIST

MCCLEAN, ESMERALDA

Provider ID: 269907

Board Certified Specialty: No

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 534-8293

After Hours Phone: (858)
534-6290

Provider Gender: Female

NPI: 1962817981

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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

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

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D. Directorio de proveedores especialistas

 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

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


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: 299637

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas


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

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

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D. Directorio de proveedores especialistas

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: 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):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

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

📍 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

☑ Provider English Spoken: Y
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

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D. Directorio de proveedores especialistas




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: 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: 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,

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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: 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

 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
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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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


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 N

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 N

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

 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

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

GILANI, SAPIDEH


Provider ID: 299557

Board Certified Specialty: Yes

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299577

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

OTOLARYNGOLOGY


HARRIS, JEFFREY

Provider ID: 299578

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299574

Board Certified Specialty: No

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

HARRIS, JEFFREY


Provider ID: 299573

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
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

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D. Directorio de proveedores especialistas

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

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

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D. Directorio de proveedores especialistas

OTOLARYNGOLOGY

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: 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):
N

Accessibility: CONTACT
PROVIDER

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





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D. Directorio de proveedores especialistas

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
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: 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
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: 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

OTOLARYNGOLOGY

MAGIT, ANTHONY

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D. Directorio de proveedores especialistas

Provider ID: 299479

Board Certified Specialty: No

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

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: 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


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D. Directorio de proveedores especialistas

American Sign Language (ASL): **NGUYEN, QUYEN**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299605

Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781

 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): **VAHABZADEH-HAGH,**

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


OTOLARYNGOLOGY

Provider ID: 299608

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY

VAHABZADEH-HAGH,


ANDREW

Provider ID: 299504

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6197

 After Hours Phone: (858)
822-6197

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RONALD

REAGAN UCLA MED CTR,

SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/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


VAHABZADEH-HAGH,

ANDREW


Provider ID: 299510

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

 Provider English Spoken: Y

Cultural Competency: N


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D. Directorio de proveedores especialistas

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: 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: 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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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

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


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


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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

 Phone: (800) 926-8273
Fax: (888) 539-8781

 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

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D. Directorio de proveedores especialistas

Provider ID: 201304

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043571045

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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

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




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

<p><u>PATHOLOGY ANATOMIC</u> <u>CLINICAL</u></p> <p>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</p>	<p>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</p>	<p>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><u>PATHOLOGY ANATOMIC</u> <u>CLINICAL</u></p> <p>BUI, JACK Provider ID: 275746 Board Certified Specialty: No 9444 MEDICAL CENTER DR LA JOLLA, CA 92037</p>	<p><u>PATHOLOGY ANATOMIC</u> <u>CLINICAL</u></p> <p>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</p>	<p><u>PATHOLOGY ANATOMIC</u> <u>CLINICAL</u></p> <p>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</p>





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




D. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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: 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


IPA: UCSD Medical Group


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

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D. Directorio de proveedores especialistas

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

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)

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D. Directorio de proveedores especialistas

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

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

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D. Directorio de proveedores especialistas

ALLERS, JENNA

Provider ID: 301037

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730605486

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SALINAS
VALLEY MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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




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D. Directorio de proveedores especialistas








 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689729683
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1467926295


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/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: 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


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

GOTTESFELD, STEVEN

Provider ID: 305278


Board Certified Specialty: No

 9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

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D. Directorio de proveedores especialistas

 Phone: (858) 500-2480

Fax: (858) 216-1908

 After Hours Phone: (858) 500-2480

Provider Gender: Male

NPI: 1427068972

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 279334

Board Certified Specialty: No

 8910 VILLA LA JOLLA DR
STE 100


LA JOLLA, CA 92037

 Phone: (800) 826-8273

Fax: (888) 539-8781


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D. Directorio de proveedores especialistas


 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


HUNTER, JACOB

Provider ID: 298431

Board Certified Specialty: No

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1114459765

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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D. Directorio de proveedores especialistas

PHYSICIANS ASSISTANT		
<p>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</p>	<p>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</p>	<p>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</p>
PHYSICIANS ASSISTANT		
<p>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</p>	<p>PHYSICIANS ASSISTANT</p> <p>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)</p>	
PHYSICIANS ASSISTANT		
<p>LIN, JOYCE Provider ID: 265146 Board Certified Specialty: No  9400 CAMPUS POINT DR LA JOLLA, CA 92093  Phone: (800) 888-9268</p>		

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D. Directorio de proveedores especialistas

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305025

Board Certified Specialty: No

3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305024

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305027

Board Certified Specialty: No

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280612

Board Certified Specialty: No

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

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

Provider ID: 258039

Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1386032308

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

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D. Directorio de proveedores especialistas

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

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

IPA: UCSD Medical Group


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):

N

 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):

N

 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):


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D. Directorio de proveedores especialistas

N
 *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*

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D. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1699263905

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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):

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

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8373

 After Hours Phone: (800)
926-8373

Provider Gender: Female

NPI: 1336659507

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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):





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D. Directorio de proveedores especialistas



N
 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: 299601
Board Certified Specialty: No
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None



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

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D. Directorio de proveedores especialistas

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: 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








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D. Directorio de proveedores especialistas

PROVIDER
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


<p>PSYCHOLOGIST</p> <p>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</p>	<p>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</p>	<p>N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group</p>
<p>PSYCHOLOGIST</p> <p>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)</p>	<p>PSYCHOLOGIST</p> <p>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):</p>	<p>PSYCHOLOGIST</p> <p>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</p>
		<p>PSYCHOLOGIST</p> <p>DUARTE, KRISTEN Provider ID: 255480</p>


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D. Directorio de proveedores especialistas

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

LASSWELL, EVE

Provider ID: 208260

Board Certified Specialty: No

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013483635

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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-CHESHER, TAMARA

Provider ID: 273224

Board Certified Specialty: No

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 534-7792

Fax: (619) 471-9017

After Hours Phone: (858)
534-7792

Provider Gender: Female

NPI: 1043441165

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

Medi-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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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

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


RADIOLOGY DIAGNOSTIC


JAFFRAY, PAUL

Provider ID: 299959

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los

Angeles General Medical


Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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. Directorio de proveedores especialistas


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

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

MARKS, ROBERT

Provider ID: 300066

Board Certified Specialty: No
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 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

 Provider 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: 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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D. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

 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):

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D. Directorio de proveedores especialistas

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*

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D. Directorio de proveedores especialistas


 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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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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

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. Directorio de proveedores especialistas

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

Board Certified Specialty: No

 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: 275371

Board Certified Specialty: Yes

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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)

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 *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






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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 *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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D. Directorio de proveedores especialistas

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
 *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
 *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: 285245
Board Certified Specialty: No


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D. Directorio de proveedores especialistas

 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

SULLIVAN, THOMAS

Provider ID: 285246

Board Certified Specialty: No

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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. Directorio de proveedores especialistas


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

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D. Directorio de proveedores especialistas

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: 291383

Board Certified Specialty: No

 9434 MEDICAL CENTER DR

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D. Directorio de proveedores especialistas

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: 291382

Board Certified Specialty: No

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

 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):
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. Directorio de proveedores especialistas

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

EMERGENCY MEDICINE

BELLOMO, THOMAS

Provider ID: 205600
 Board Certified Specialty: No
 5565 GROSSMONT
 CENTER DR STE 2 STE 2
 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619)
 713-5375
 Provider Gender: Male
 NPI: 1700926698
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, UCSF BENIOFF
 CHILDREN'S HOSPITAL
 OAKLAND
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19

American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

EMERGENCY MEDICINE

LOVEJOY, AMY

Provider ID: 206106
 Board Certified Specialty: No
 5565 GROSSMONT
 CENTER DR STE 2 STE 2
 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619)
 713-5375
 Provider Gender: Female
 NPI: 1790856557
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 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

EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206948
 Board Certified Specialty: No
 5565 GROSSMONT
 CENTER DR STE 2 STE 2
 LA MESA, CA 91942
 Phone: (619) 713-5375
 Fax: (619) 713-5379
 After Hours Phone: (619)
 713-5375
 Provider Gender: Female
 NPI: 1124360565
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 Website: N/A
 IPA: Rady Childrens Health
 Network




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D. Directorio de proveedores especialistas

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: 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	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 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	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:	HEMATOLOGY / ONCOLOGY MEDIC, IGOR Provider ID: 295654 Board Certified Specialty: No 5555 GROSSMONT CENTER DR LA MESA, CA 91942 Phone: (619) 644-3030 Fax: (619) 644-3638 After Hours Phone: (619) 644-3030 Provider Gender: Male NPI: 1154618593 Provider English Spoken: Y Provider Language(s) Spoken: Arabic, Serbian, Spanish Cultural Competency: N Hospital Affiliation: GROSSMONT HOSPITAL, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 18\None American Sign Language (ASL): N






Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




D. Directorio de proveedores especialistas

 *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: 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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):

 Accessibility: CONTACT
PROVIDER

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):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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*




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.





D. Directorio de proveedores especialistas


PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: 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
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: 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






Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




D. Directorio de proveedores especialistas

Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None
American Sign Language (ASL): N
N
 *Accessibility:* CONTACT PROVIDER
 *Hours:* M-TH 8:30AM-4PM
F 8AM-OPM
 *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
Min/Max Age: 0\None
American Sign Language (ASL):
 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas









 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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

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

FERRARA, SAMANTHA

Provider ID: 306005

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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





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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

Min/Max Age: 0\None
 American Sign Language (ASL): N
 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. Directorio de proveedores especialistas

 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


FULKES, 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


FULKES, 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. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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

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

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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


D. Directorio de proveedores especialistas

Min/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):

 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):

 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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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 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, 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. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


D. Directorio de proveedores especialistas


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


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. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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

N

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 *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: 254089

Board Certified Specialty: No

 25170 HANCOCK AVE
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

 *After Hours Phone: (951)
600-1640*

Provider Gender: Female

NPI: 1780860536

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
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: 254296

Board Certified Specialty: No

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

 *After Hours Phone: (951)
600-1640*

Provider Gender: Female

NPI: 1780860536

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation:
CHILDRENS HOSP OF LOS
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

PATEL, VIJAY

Provider ID: 297034

Board Certified Specialty: No

 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

 *Phone: (951) 600-1640*

Fax: (951) 600-1760

 *After Hours Phone: (951)
600-1640*

Provider Gender: Male

NPI: 1508250747

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health
Network*

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

Min/Max 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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D. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max 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. Directorio de proveedores especialistas

 *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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

DIEGO


Medi-Cal Open Panel: Yes

Min/Max 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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D. Directorio de proveedores especialistas

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):  N

 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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max 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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D. Directorio de proveedores especialistas


 *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):
N

 *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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas





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. Directorio de proveedores especialistas

 *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. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/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. Directorio de proveedores especialistas

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):

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

 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: 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)

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

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D. Directorio de proveedores especialistas

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


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)

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


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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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


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,

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


OBSTETRICS / GYNECOLOGY

DEL ROSARIO, GELEN

Provider ID: 206092

Board Certified Specialty: No

 *502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950*


 *Phone: (619) 475-1261*


Fax: (619) 475-1267

 *After Hours Phone: (619)
475-1261*

Provider Gender: Female

NPI: 1255643474

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish, Tagalog*

Cultural Competency: N

Hospital Affiliation: SHARP

*CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9AM-5PM*

 *Website: N/A*

IPA: BLUE SHIELD PROMISE

Community Care IPA LLC,

Rady Childrens Health

Network


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

HEALTH PLAN DIRECT,

Community Care IPA LLC,

Rady Childrens Health

Network

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D. Directorio de proveedores especialistas

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

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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: 305011

Board Certified Specialty: No

 3400 E 8TH ST STE 108
 NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
 482-3000

Provider Gender: Female

NPI: 1457136269


 Provider English Spoken: Y
 Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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

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

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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D. Directorio de proveedores especialistas

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: 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

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

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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

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

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. Directorio de proveedores especialistas

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 304495

Board Certified Specialty: No

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892


 After Hours Phone: (760)
631-5000


Provider Gender: Female
NPI: 1013668680

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\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

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

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D. Directorio de proveedores especialistas

Medi-Cal Open 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


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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 *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):

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas



<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>
<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>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>CHIROPRACTOR</p> <p>JU, NATHANIEL Provider ID: 290221 Board Certified Specialty: No</p>

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D. Directorio de proveedores especialistas



 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. Directorio de proveedores especialistas





 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. Directorio de proveedores especialistas

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

 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

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D. Directorio de proveedores especialistas



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. Directorio de proveedores especialistas

<p>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: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network</p>	<p>Medi-Cal Open Panel: Yes Min/Max 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><u>MATERNAL AND FETAL MEDICINE</u></p>	<p><u>MATERNAL AND FETAL MEDICINE</u></p>	<p><u>MATERNAL AND FETAL MEDICINE</u></p>
<p>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 <input type="checkbox"/> 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</p>	<p>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 <input type="checkbox"/> 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</p>	<p>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 <input type="checkbox"/> 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,</p>




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D. Directorio de proveedores especialistas

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: 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

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




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. Directorio de proveedores especialistas

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

Provider ID: 273226

Board Certified Specialty: No

 4002 VISTA WAY
OCEANSIDE, CA 92056

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205619

Board Certified Specialty: No

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (960) 547-1020
Fax: (760) 547-1021

 After Hours Phone: (960)
547-1020

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

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D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.








D. Directorio de proveedores especialistas

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


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D. Directorio de proveedores especialistas

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):
N

 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas






 *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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

☎ *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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D. Directorio de proveedores especialistas









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. Directorio de proveedores especialistas

☎ 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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 *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


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D. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 *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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 *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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.






D. Directorio de proveedores especialistas




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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D. Directorio de proveedores especialistas

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): Board Certified Specialty: No

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): Network

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

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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

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

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

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





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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas




<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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D. Directorio de proveedores especialistas




 *Provider English Spoken: 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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

☎ 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: 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

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D. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/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

Medi-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: 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: 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: 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. Directorio de proveedores especialistas


 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

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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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



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D. Directorio de proveedores especialistas

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: 54944

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D. Directorio de proveedores especialistas

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

**CAMARGO-LOWTHERS,
ANGELICA**

Provider ID: 270981

Board Certified Specialty: No

8010 FROST ST STE 510
SAN DIEGO, CA 92123

Phone: (858) 637-4700

Fax: (858) 637-4701

After Hours Phone: (858)

637-4700

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

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





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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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):
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

DEUTSCH, KAREN

Provider ID: 247980

Board Certified Specialty: No

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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. Directorio de proveedores especialistas

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, 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

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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):




 *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):

 *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: 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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p><i>Board Certified Specialty: No</i>  16950 VIA TAZON SAN DIEGO, CA 92127  <i>Phone: (800) 926-8273</i>  <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i></p>	<p><i>Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p>
<hr/>		
<u>CERTIFIED NURSE PRACTITIONER</u>		
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<p>GOMEZ, LESLIE <i>Provider ID: 299467</i> <i>Board Certified Specialty: No</i>  8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122  <i>Phone: (800) 926-8273</i>  <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Female</i> <i>NPI: 1528578713</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i></p>	<p><i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD</i></p>
<hr/>		
<u>CERTIFIED NURSE PRACTITIONER</u>		
<hr/>		
<p>GOMEZ, LESLIE <i>Provider ID: 299466</i></p>	<p>GUADARRAMA, IGNACIO <i>Provider ID: 262419</i> <i>Board Certified Specialty: No</i>  995 GATEWAY CENTER WAY STE 105 SAN DIEGO, CA 92102  <i>Phone: (619) 264-1934</i>  <i>Fax: (619) 264-1937</i>  <i>After Hours Phone: (619) 264-1934</i> <i>Provider Gender: Male</i> <i>NPI: 1821331174</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s)</i></p>	<p>HA, THU <i>Provider ID: 293260</i> <i>Board Certified Specialty: No</i>  6973 LINDA VISTA RD SAN DIEGO, CA 92111  <i>Phone: (858) 279-0925</i>  <i>Fax: (858) 633-4680</i>  <i>After Hours Phone: (858) 279-0925</i> <i>Provider Gender: Female</i> <i>NPI: 1346443983</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Vietnamese</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i></p>
<hr/>		
<u>CERTIFIED NURSE PRACTITIONER</u>		
<hr/>		
<p>GOMEZ, LESLIE <i>Provider ID: 299466</i></p>	<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i></p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

HAROUGH, 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. Directorio de proveedores especialistas

 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


D. Directorio de proveedores especialistas


<p> 9339 GENESEE AVE STE 350 SAN DIEGO, CA 92121</p> <p> Phone: (858) 454-4300 Fax: (858) 454-5088</p> <p> After Hours Phone: (858) 454-4300</p> <p>Provider Gender: Female NPI: 1821062878</p> <p> Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM</p> <p> Website: N/A IPA: Community Care IPA LLC</p>	<p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 14\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> 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</p> <p> Website: N/A IPA: IHP of Southern Cal-PHP</p>	<p>MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Medi-Cal Open Panel: Yes Min/Max Age: 14\None American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> 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</p> <p> 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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, GRETEL 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. Directorio de proveedores especialistas


 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: 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

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

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. Directorio de proveedores especialistas

 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




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D. Directorio de proveedores especialistas

 *Provider 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: 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*
PROVIDER
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: Community Care IPA LLC,
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*

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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)


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D. Directorio de proveedores especialistas

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-PPP


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. Directorio de proveedores especialistas

 *Provider English Spoken: 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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas








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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas



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. Directorio de proveedores especialistas

 *Provider English 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. Directorio de proveedores especialistas




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. Directorio de proveedores especialistas

Medi-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

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):

 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):

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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

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D. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/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: 210018

Board Certified Specialty: No

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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


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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

<p><u>CERTIFIED REGISTERED NURSE MIDWIFE</u></p> <p>HIRSCH, JENNIFER Provider ID: 210058 Board Certified Specialty: No  16950 VIA TAZON SAN DIEGO, CA 92127  Phone: (800) 926-8273  After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1891752069  Provider English Spoken: Y  Provider Language(s) Spoken: Spanish Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p>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</p>	<p> Website: N/A IPA: UCSD Medical Group</p> <p><u>CERTIFIED REGISTERED NURSE MIDWIFE</u></p> <p>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</p>
<p><u>CERTIFIED REGISTERED NURSE MIDWIFE</u></p> <p>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</p>	<p><u>CERTIFIED REGISTERED NURSE MIDWIFE</u></p> <p>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  Hours: M-F 8AM-5PM</p>	<p><u>CERTIFIED REGISTERED NURSE MIDWIFE</u></p> <p>NATHAN, CARLY Provider ID: 301048 Board Certified Specialty: No  3750 CONVOY ST STE 312 SAN DIEGO, CA 92111  Phone: (800) 926-8273 Fax: (888) 539-8781  After Hours Phone: (800)</p>

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D. Directorio de proveedores especialistas

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: 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

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

CHIROPRACTOR

BUI, MAI
 Provider ID: 295791
 Board Certified Specialty: No
 5354 UNIVERSITY AVE STE 3
 SAN DIEGO, CA 92105

Phone: (619) 692-3211
 Fax: (619) 640-3211
 After Hours Phone: (619) 692-3211
 Provider Gender: Female
 NPI: 1780901264
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

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: 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


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)
 Spoken: Spanish


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D. Directorio de proveedores especialistas

Cultural Competency: 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

CHULA VISTA, YUMA

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D. Directorio de proveedores especialistas


REGIONAL MEDICAL CENTER Medical Group-SD

Medi-Cal Open 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


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

Provider Gender: Female

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D. Directorio de proveedores especialistas

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

Provider ID: 270913

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D. Directorio de proveedores especialistas

Board Certified Specialty: No

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

American Sign Language (ASL):




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D. Directorio de proveedores especialistas

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>	<p><i>Provider ID: 271129</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 4520 EXECUTIVE DR STE P2 SAN DIEGO, CA 92121</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p>	<p><i>926-8273</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1801206354</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i></p>
EMERGENCY MEDICINE		
<p>BARRY, JEFFREY</p> <p><i>Provider ID: 271132</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1801207006</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1801207006</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>	<p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 18\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>
EMERGENCY MEDICINE		
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>	<p>BELLINGHAUSEN, AMY</p> <p><i>Provider ID: 270333</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 4520 EXECUTIVE DR STE P2 SAN DIEGO, CA 92121</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p>	<p>EMERGENCY MEDICINE</p> <p>BELLINGHAUSEN, AMY</p> <p><i>Provider ID: 270336</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1801206354</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP</i></p>
EMERGENCY MEDICINE		
<p>BARRY, JEFFREY</p>	<p> <i>After Hours Phone: (800) 926-8273</i></p>	<p><i>926-8273</i></p>




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D. Directorio de proveedores especialistas







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: 270334
Board Certified Specialty: No
 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1801206354
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\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
Hospital Affiliation: UCSD

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D. Directorio de proveedores especialistas




MEDICAL CTR, 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

 After Hours Phone: (619)

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D. Directorio de proveedores especialistas

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)
 926-8273


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D. Directorio de proveedores especialistas





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. Directorio de proveedores especialistas

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

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239798

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 605-4441

After Hours Phone: (858)
605-4441

Provider Gender: Female

NPI: 1871732214

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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
MEDICAL CTR, 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

PHAM, LILY

Provider ID: 304933

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1811423072

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

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D. Directorio de proveedores especialistas

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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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
SA 8AM-8PM
 *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. Directorio de proveedores especialistas


 *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

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

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. Directorio de proveedores especialistas

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: 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

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: 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


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D. Directorio de proveedores especialistas

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: 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

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, 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,

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D. Directorio de proveedores especialistas

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

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSTAL

Provider ID: 299743
 Board Certified Specialty: No
 10737 CAMINO RUIZ STE
 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 Fax: (858) 578-4417
 After Hours Phone: (844)
 200-2426
 Provider Gender: Female
 NPI: 1629480272
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: TWIN
 CITIES COMMUNITY
 HOSPITAL, SIERRA VISTA
 REGIONAL MED CTR,
 PARADISE VALLEY HOSPITAL
 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

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. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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


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

IPA: UCSD Medical Group

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

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D. Directorio de proveedores especialistas

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

KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: UCSD Medical Group

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447

Board Certified Specialty: No

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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


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

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)

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

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D. Directorio de proveedores especialistas

☎ 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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D. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: IHP of Southern Cal-PHP


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

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

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: 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

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D. Directorio de proveedores especialistas

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

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: 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

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

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D. Directorio de proveedores especialistas

<p>GENETICS MEDICAL</p> <p>DEL CAMPO CASANELLES, MIGUEL <i>Provider ID: 206013</i> <i>Board Certified Specialty: No</i>  7920 FROST ST STE 200 SAN DIEGO, CA 92123  <i>Phone: (858) 966-7484</i> <i>Fax: (858) 966-4064</i>  <i>After Hours Phone: (858) 966-7484</i> <i>Provider Gender: Male</i> <i>NPI: 1598141475</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: French, Italian, Portuguese, Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p><i>Board Certified Specialty: No</i>  3030 CHILDRENS WAY FL 4 SAN DIEGO, CA 92123  <i>Phone: (858) 966-5840</i>  <i>After Hours Phone: (858) 966-5840</i> <i>Provider Gender: Female</i> <i>NPI: 1457330607</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p><i>NPI: 1457330607</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>
<p>GENETICS MEDICAL</p> <p>MARDACH, REBECCA <i>Provider ID: 241947</i></p>	<p>GENETICS MEDICAL</p> <p>MARDACH, REBECCA <i>Provider ID: 241946</i> <i>Board Certified Specialty: No</i>  7920 FROST ST STE 200 SAN DIEGO, CA 92123  <i>Phone: (858) 966-5840</i>  <i>After Hours Phone: (858) 966-5840</i> <i>Provider Gender: Female</i></p>	<p>HEARING AID DEALER / SUPPLIER</p> <p>ANDERSON, ELAINE <i>Provider ID: 268691</i> <i>Board Certified Specialty: No</i>  9340 CLAIREMONT MESA BLVD STE D SAN DIEGO, CA 92123  <i>Phone: (858) 278-9911</i> <i>Fax: (858) 565-7324</i>  <i>After Hours Phone: (858) 278-9911</i> <i>Provider Gender: Female</i> <i>NPI: 1063558856</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i></p>


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D. Directorio de proveedores especialistas

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


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: 268653

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

 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): 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: 268653

Board Certified Specialty: No

 9340 CLAIREMONT MESA BLVD STE D

SAN DIEGO, CA 92123

 Phone: (858) 278-9911

Fax: (858) 565-7324

 After Hours Phone: (858) 278-9911

Provider Gender: Female

NPI: 1902853344


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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): Board Certified Specialty: No

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

HEMATOLOGY / ONCOLOGY

LEE, KAREN

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D. Directorio de proveedores especialistas

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

Website: N/A

IPA: UCSD Medical Group

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 Website: N/A
IPA: UCSD Medical Group

HOSPICE AND PALLIATIVE MEDICINE


RUBENZIK, 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

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, 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

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. Directorio de proveedores especialistas

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p style="text-align: center;">HOSPITALIST MD/DO</p> <hr/> <p>HAMMOND, CHARLES</p> <p><i>Provider ID: 278588</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1033641816</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p style="text-align: center;">HOSPITALIST MD/DO</p> <hr/> <p>SHINDO, YURI</p>	<p><i>Provider ID: 284743</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1700271939</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Japanese</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 18\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p style="text-align: center;">HOSPITALIST MD/DO</p> <hr/> <p>TONG, ALEXANDER</p> <p><i>Provider ID: 300045</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 200 W ARBOR DR SAN DIEGO, CA 92103</p>	<p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1356804926</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p> <hr/> <p style="text-align: center;">INFECTIOUS DISEASE</p> <hr/> <p>ALDOUS, JEANNETTE</p> <p><i>Provider ID: 290420</i></p> <p><i>Board Certified Specialty: No</i></p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114</p> <p> <i>Phone: (619) 662-4100</i></p> <p><i>Fax: (619) 205-6384</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1073650339</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p>
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D. Directorio de proveedores especialistas

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):

N

 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

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D. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 277225

N

 Accessibility: CONTACT PROVIDER

 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

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


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

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D. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max 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. Directorio de proveedores especialistas






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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

Board Certified Specialty: No

 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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas




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: 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

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

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D. Directorio de proveedores especialistas

LEVERONE, NICHOLAS

Provider ID: 272692

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407388564

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\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

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D. Directorio de proveedores especialistas


 Phone: (858) 237-0572
 After Hours Phone: (858) 237-0572
 Provider Gender: Male
 NPI: 1023246212
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Russian
 Cultural Competency: N
 Hospital Affiliation: SHARP
 MEMORIAL HOSPITAL, SHARP
 CHULA VISTA MED CTR,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS
 MERCY HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\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):

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

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D. Directorio de proveedores especialistas

<p>INTERNAL MEDICINE</p> <p>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</p>	<p>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</p>	<p> Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>
<p>INTERNAL MEDICINE</p> <p>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)</p>	<p>INTERNAL MEDICINE</p> <p>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</p>	<p>INTERNAL MEDICINE</p> <p>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</p>
		<p>INTERNAL MEDICINE</p> <p>THOMAS, ROBERT Provider ID: 238929</p>

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D. Directorio de proveedores especialistas

Board Certified Specialty: Yes

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053765909

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\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

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

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

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D. Directorio de proveedores especialistas

 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






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: 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

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D. Directorio de proveedores especialistas


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


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

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

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

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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









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D. Directorio de proveedores especialistas

 Website: N/A
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: 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

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

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D. Directorio de proveedores especialistas

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
☐ Provider English 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





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D. Directorio de proveedores especialistas




 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1457770240
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PIONEERS
 MEMORIAL HOSPITAL, EL
 CENTRO REGIONAL MEDICAL
 CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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 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: 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
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

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D. Directorio de proveedores especialistas


Medi-Cal Open 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


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

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D. Directorio de proveedores especialistas


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


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


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

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

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D. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/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

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

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

 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

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D. Directorio de proveedores especialistas

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296990

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: 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: 208644

Board Certified Specialty: No

4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273





After Hours Phone: (800)

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D. Directorio de proveedores especialistas

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

MOORE, THOMAS
 Provider ID: 208643
 Board Certified Specialty: No
 4168 FRONT ST
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Male
 NPI: 1184682379
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, SCRIPPS
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\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

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D. Directorio de proveedores especialistas

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

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: 277304

Board Certified Specialty: No

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT

HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp

Grossmont Hospital, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas





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

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: 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

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,

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D. Directorio de proveedores especialistas

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
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



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D. Directorio de proveedores especialistas

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




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

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D. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max 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


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

Network


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






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D. Directorio de proveedores especialistas

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






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




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

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)

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D. Directorio de proveedores especialistas

966-5818
 Provider Gender: Male
 NPI: 1427129287
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 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: 206210


Board Certified Specialty: No
 3030 CHILDRENS WAY FL 2
 SAN DIEGO, CA 92123
 Phone: (858) 966-8022
 Fax: (858) 966-8457
 After Hours Phone: (858) 966-8022
 Provider Gender: Female
 NPI: 1952503435
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health Network, UCSD Medical Group

NEONATAL / PERINATAL MEDICINE

MARC AURELE, KRISHELLE
 Provider ID: 206208
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123


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D. Directorio de proveedores especialistas

 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: 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

MATоба, 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

MATоба, 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

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D. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max 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: 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: 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

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D. Directorio de proveedores especialistas

CHILDRENS HOSPITAL 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

Medi-Cal Open Panel: Yes


Min/Max 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):

N
 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)

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D. Directorio de proveedores especialistas

966-5818
 Provider Gender: Female
 NPI: 1477625325
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 UCSF BENIOFF CHILDREN'S
 HOSPITAL OAKLAND,
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 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: 206060
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (619) 543-3759

Fax: (619) 543-3812
 After Hours Phone: (619)
 543-3759
 Provider Gender: Male
 NPI: 1205047545
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, EL CENTRO
 REGIONAL MEDICAL CENTER,
 SOUTHWEST HEALTHCARE
 INLAND VALLEY HOSPITAL,
 SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 RADY CHILDRENS HOSPITAL
 SAN DIEGO, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO
 Provider ID: 206171
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (619) 543-3759

Fax: (619) 543-3812
 After Hours Phone: (619)
 543-3759
 Provider Gender: Female
 NPI: 1649433103
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF
 BENIOFF CHILDREN'S
 HOSPITAL OAKLAND, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 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

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D. Directorio de proveedores especialistas

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

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 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

 *After Hours Phone: (858)*






















966-5818

IPA: Rady Childrens Health Network, UCSD Medical Group

NEONATAL / PERINATAL

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D. Directorio de proveedores especialistas

MEDICINE		NEONATAL / PERINATAL MEDICINE		
<p>SPEZIALE, MARK Provider ID: 206126 Board Certified Specialty: No  3020 CHILDRENS WAY SAN DIEGO, CA 92123  Phone: (858) 966-5888 Fax: (858) 966-7483  After Hours Phone: (858) 966-5888 Provider Gender: Male NPI: 1801978143  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM</p>	<p> Website: N/A IPA: Rady Childrens Health Network</p>	<p>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>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 MERCY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19</p>	<p>NEONATAL / PERINATAL MEDICINE</p> <p>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</p>

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D. Directorio de proveedores especialistas

IPA: Rady Childrens Health Network

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

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D. Directorio de proveedores especialistas

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: 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




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D. Directorio de proveedores especialistas

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KINDRED
HOSPITAL SAN DIEGO,
SELECT SPECIALTY HOSPITAL
SAN DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

Provider English Spoken: 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

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

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

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

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




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D. Directorio de proveedores especialistas

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 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: 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

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*

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D. Directorio de proveedores especialistas

IPA: UCSD Medical Group


NEUROLOGY

FREDERICK, ALIYA

Provider ID: 283152

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1548657992

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas


Hospital Affiliation: RADY
CHILDRENS HOSPITAL 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


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

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D. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1104922038

Provider English Spoken: Y

Provider Language(s)

Spoken: Russian, Samoan, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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): N

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

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D. Directorio de proveedores especialistas

NEUROLOGY	
<p>LEE, DAVID Provider ID: 246263 Board Certified Specialty: No  200 W ARBOR DR FL 1 SAN DIEGO, CA 92103  Phone: (800) 926-8273  After Hours Phone: (800) 926-8273 Provider Gender: Male NPI: 1871884130  Provider English Spoken: Y  Provider Language(s) Spoken: Korean Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p>	<p> 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</p>
NEUROLOGY	
<p>LEGER, GABRIEL Provider ID: 247608 Board Certified Specialty: No  4510 EXECUTIVE DR STE 325 SAN DIEGO, CA 92121  Phone: (858) 543-8540</p>	<p> 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</p>
NEUROLOGY	
<p>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</p>	<p> 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</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 304197

Board Certified Specialty: No

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801215926

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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

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




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D. Directorio de proveedores especialistas



 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *Website: N/A*
IPA: UCSD Medical Group

NEUROLOGY

RIGGINS, NINA

Provider ID: 304200
Board Certified Specialty: No
 6655 ALVARADO RD
 SAN DIEGO, CA 92120
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1568655264

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Russian*
Cultural Competency: N
Hospital Affiliation: MEDICAL CTR AT UCSF
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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

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

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

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D. Directorio de proveedores especialistas

NPI: 1861929036

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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):

 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):

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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):

 Accessibility: CONTACT
PROVIDER



















 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

<p style="text-align: center;">NEUROLOGY CHILD</p> <p>GRAVES, JENNIFER Provider ID: 261037 Board Certified Specialty: No  3020 CHILDRENS WAY SAN DIEGO, CA 92123  Phone: (858) 966-8800  After Hours Phone: (858) 966-8800 Provider Gender: Female NPI: 1992849863  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, MEDICAL CTR AT UCSF, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: Rady Childrens Health Network</p>	<p>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</p>	<p>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</p>
<p style="text-align: center;">NEUROLOGY CHILD</p> <p>GUIDO-ESTRADA, NATALIE</p>	<p style="text-align: center;">NEUROLOGY CHILD</p> <p>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</p>	<p style="text-align: center;">NUCLEAR MEDICINE</p> <p>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):</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group


NUCLEAR MEDICINE

SHARIF TABRIZI, AHMAD

Provider ID: 300027

Board Certified Specialty: No

 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: 291330

Board Certified Specialty: No


 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1790128759

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group

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D. Directorio de proveedores especialistas

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

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

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

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D. Directorio de proveedores especialistas

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: 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

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291337

Board Certified Specialty: No

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


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

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D. Directorio de proveedores especialistas

PROVIDER
Hours: M-F 8AM-5PM
Website: N/A
IPA: Community Care IPA LLC

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

Website: N/A
IPA: IHP of Southern Cal-PHP

OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296001
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: 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

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

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D. Directorio de proveedores especialistas

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278915

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457662868

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\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

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D. Directorio de proveedores especialistas

 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

 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
Network

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

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D. Directorio de proveedores especialistas



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

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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 10\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)

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D. Directorio de proveedores especialistas

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

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):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

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




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D. Directorio de proveedores especialistas







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

PINSON, KELSEY
 Provider ID: 284287
 Board Certified Specialty: No
 4168 FRONT ST
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1841722485
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO



Medi-Cal Open Panel: Yes
 Min/Max Age: 16\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY


PINSON, KELSEY
 Provider ID: 284286
 Board Certified Specialty: No
 4910 DIRECTORS PL STE 200
 SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1841722485
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8AM-5PM

 Website: N/A
 IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

PINSON, KELSEY
 Provider ID: 284288
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1841722485
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UNIVERSITY HSP OF SAN DIEGO CO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\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: 284298
 Board Certified Specialty: No
 200 W ARBOR DR

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D. Directorio de proveedores especialistas

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295263861
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8AM-5PM
🌐 Website: N/A
IPA: UCSD Medical Group

OBSTETRICS / GYNECOLOGY

SHAH, NEMI

Provider ID: 272580
Board Certified Specialty: No
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1558715268
☑ Provider English Spoken: Y
☑ Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, TEMECULA VALLEY HOSPITAL INC, LOMA LINDA UNIVERSITY MED CTR MURRIETA
Medi-Cal Open Panel: Yes
Min/Max Age: 16\None
American Sign Language (ASL): 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

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D. Directorio de proveedores especialistas

 *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*

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: 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

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

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

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D. Directorio de proveedores especialistas

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

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 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

Provider ID: 206549
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669770939
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\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. Directorio de proveedores especialistas

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206548

Board Certified Specialty: No

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

Provider English Spoken: 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


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D. Directorio de proveedores especialistas

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: 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

BAXTER, SALLY

Provider ID: 272788

Board Certified Specialty: No

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

HOSPITAL 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

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: 297011

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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)

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D. Directorio de proveedores especialistas

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

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
 Hours: M-F 8AM-5PM
 SA 8AM-5PM
 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

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D. Directorio de proveedores especialistas

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)
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

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D. Directorio de proveedores especialistas

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

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

OHALLORAN, 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

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D. Directorio de proveedores especialistas

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

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: 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









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D. Directorio de proveedores especialistas

 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

PHAN, RYAN

Provider ID: 302925
 Board Certified Specialty: No
 4844 UNIVERSITY AVE STE A
 SAN DIEGO, CA 92105
 Phone: (619) 283-1303
 Fax: (619) 283-1666
 After Hours Phone: (619) 283-1303
 Provider Gender: Male
 NPI: 1588027213
 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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




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D. Directorio de proveedores especialistas

SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1699268292
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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):
 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

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D. Directorio de proveedores especialistas

AOTO, KIM

Provider ID: 296795

Board Certified Specialty: No

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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)

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D. Directorio de proveedores especialistas

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

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

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

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

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D. Directorio de proveedores especialistas


OPTOMETRIST

YU, CAROL

Provider ID: 301684

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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


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

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


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D. Directorio de proveedores especialistas

 After Hours Phone: (619) 295-6774

Provider Gender: Male

NPI: 1629205174

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): IPA: UCSD Medical Group

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): N

 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

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D. Directorio de proveedores especialistas

Provider ID: 299634

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

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


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: 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: 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: 299582

Board Certified Specialty: No

 16950 VIA TAZON
SAN DIEGO, CA 92127



 Phone: (800) 926-8273

Fax: (888) 539-8781



 After Hours Phone: (800)



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D. Directorio de proveedores especialistas


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

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: 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

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

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

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D. Directorio de proveedores especialistas

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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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: 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: 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




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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: 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




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

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

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D. Directorio de proveedores especialistas

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


HOM, DAVID


Provider ID: 299511

Board Certified Specialty: No

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 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

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D. Directorio de proveedores especialistas

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301053

Board Certified Specialty: No

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124034053

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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

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

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D. Directorio de proveedores especialistas

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: 299443
Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-6631
 After Hours Phone: (619)
543-6631

Provider Gender: Female
NPI: 1780860536


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\None

American Sign Language (ASL): Network
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM



 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


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: 299482

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

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D. Directorio de proveedores especialistas

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: 299481

Board Certified Specialty: No

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1891858379

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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




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D. Directorio de proveedores especialistas

 *Provider 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




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: 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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

OTOLARYNGOLOGY


PATEL, VIJAY

Provider ID: 297037

Board Certified Specialty: No

 3030 CHILDRENS WAY STE 1

SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858) 309-7701

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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: 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: 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

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D. Directorio de proveedores especialistas

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: 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: 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


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


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

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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

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: 275721

Board Certified Specialty: No

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184674145

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

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D. Directorio de proveedores especialistas

 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

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


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D. Directorio de proveedores especialistas

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


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):

N

 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):

N

 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):

N

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D. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

IPA: UCSD Medical Group


PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA

Provider ID: 275789

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1174757181

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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: 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*

 *Website: N/A*

IPA: UCSD Medical Group

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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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: 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

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

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):
N

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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 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 N

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):

 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

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D. Directorio de proveedores especialistas

Network

PEDIATRIC ALLERGY / IMMUNOLOGY


LEIBEL, SYDNEY


Provider ID: 205724

Board Certified Specialty: No

 5776 RUFFIN RD


SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858)
292-1144

Provider Gender: Male

NPI: 1861666919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas

American Sign Language (ASL): IPA: Rady Childrens Health
N
Network

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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


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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

966-5855
Provider Gender: Female
NPI: 1780642280
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F 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

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D. Directorio de proveedores especialistas

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858) 966-5855

Provider Gender: Male

NPI: 1518036821

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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):
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
Network


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1376705707

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 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

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D. Directorio de proveedores especialistas

PEDIATRIC CARDIOLOGY

STEINBERG, LEONARD

Provider ID: 248208

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1538279484

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

IPA: Rady Childrens Health
Network

Hospital Affiliation: RADY

CHILDRENS HOSPITAL 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

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9AM-5PM

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

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):

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

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D. Directorio de proveedores especialistas

PEDIATRIC CARDIOLOGY

WERHO, DAVID

Provider ID: 206316

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1235391863

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

IPA: Rady Childrens Health Network

PEDIATRIC DERMATOLOGY

EICHENFIELD, DAWN

Provider ID: 283142

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6795

Fax: (858) 966-7479

After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1295198091

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 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

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D. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): CHILDRENS HSP

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


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


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

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D. Directorio de proveedores especialistas

SA 1PM-10PM
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

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

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:




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D. Directorio de proveedores especialistas







SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
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):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 8AM-5PM
 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

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

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D. Directorio de proveedores especialistas





MEDICINE	
<p>CONRAD, HEATHER <i>Provider ID: 205960</i> <i>Board Certified Specialty: No</i>  3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 966-8800</i>  <i>After Hours Phone: (858) 966-8800</i> <i>Provider Gender: Female</i> <i>NPI: 1205813409</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>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</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p>DEL RE, ANGELO <i>Provider ID: 206081</i> <i>Board Certified Specialty: No</i>  3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 966-8800</i>  <i>After Hours Phone: (858) 966-8800</i> <i>Provider Gender: Male</i> <i>NPI: 1275761371</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>
<p>PEDIATRIC EMERGENCY MEDICINE</p>	<p>PEDIATRIC EMERGENCY MEDICINE</p>
<p>DO, STEPHANIE <i>Provider ID: 287393</i> <i>Board Certified Specialty: No</i>  3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 966-8800</i>  <i>After Hours Phone: (858) 966-8800</i> <i>Provider Gender: Female</i> <i>NPI: 1750513644</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: Martin</i></p>	<p>PEDIATRIC EMERGENCY MEDICINE  3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 966-8800</i>  <i>After Hours Phone: (858) 966-8800</i> <i>Provider Gender: Female</i> <i>NPI: 1366622078</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: No</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>


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D. Directorio de proveedores especialistas






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

DONOFRIO-ODMANN, JOY
Provider ID: 205375
Board Certified Specialty: No
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
 Provider Gender: Female
 NPI: 1740571165
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL







OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A
 IPA: Rady Childrens Health
Network

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
 IPA: Rady Childrens Health
Network

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

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D. Directorio de proveedores especialistas

IPA: Rady Childrens Health Network

PEDIATRIC EMERGENCY MEDICINE

FISHER, JAY

Provider ID: 295690

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1629118518

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 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

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D. Directorio de proveedores especialistas

 Hours: M-F 8AM-5PM
SA 8AM-2PM

 Website: N/A

IPA: Rady Childrens Health
Network

PEDIATRIC EMERGENCY MEDICINE


GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 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

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D. Directorio de proveedores especialistas

DIEGO


Medi-Cal Open Panel: Yes

Min/Max 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):

N

 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):

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

JOSHI, WEENA

Provider ID: 262232

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1376862177

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 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

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D. Directorio de proveedores especialistas

MEDICINE

LOVEJOY, AMY

Provider ID: 206107

Board Certified Specialty: No

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1790856557

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

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

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D. Directorio de proveedores especialistas

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

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
Network


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: 262107

Board Certified Specialty: No

 8110 BIRMINGHAM WAY FL
1

SAN DIEGO, CA 92123

 Phone: (858) 966-7785

 After Hours Phone: (858)

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D. Directorio de proveedores especialistas

966-7785
 Provider Gender: Female
 NPI: 1689646689
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: No
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F 8AM-5PM
 Website: N/A
 IPA: Rady Childrens Health
 Network

PEDIATRIC EMERGENCY MEDICINE

MINKA, GENEVIEVE
 Provider ID: 205336
 Board Certified Specialty: No
 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 Phone: (619) 280-2905
 Fax: (619) 283-1614
 After Hours Phone: (619)
 280-2905
 Provider Gender: Female
 NPI: 1689646689
 Provider English Spoken: Y

Provider Language(s)
 Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: SU 1PM-10PM
 M-F 4PM-10PM
 SA 1PM-10PM
 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
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French
 Cultural Competency: N
 Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A
 IPA: Rady Childrens Health
 Network

PEDIATRIC EMERGENCY MEDICINE

MISHRA-OCCHINO, SEEMA
 Provider ID: 205404
 Board Certified Specialty: No
 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
 576-1700
 Provider Gender: Female
 NPI: 1689612830
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN
 DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

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D. Directorio de proveedores especialistas

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health 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):

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):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network


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

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D. Directorio de proveedores especialistas

DIEGO

Medi-Cal Open Panel: Yes

Min/Max 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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800

Provider Gender: Male
NPI: 1710418744

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

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):
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: 205784

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GLENDALE


ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas


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


QUINONES-PEREZ, BIANCA

Provider ID: 206949


Board Certified Specialty: No

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905


Fax: (619) 283-1614

 After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 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

 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

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D. Directorio de proveedores especialistas

Provider ID: 305340

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1982059689

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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

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,

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D. Directorio de proveedores especialistas

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


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):
N

 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):
N

 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

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D. Directorio de proveedores especialistas

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


TAMAS, VANESSA

Provider ID: 206212

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 576-1700

 After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1326225368

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND

VALLEY HOSPITAL,

CHILDRENS HOSP OF LOS

ANGELES, SOUTHWEST

HEALTHCARE RANCHO


SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health
Network


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

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

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D. Directorio de proveedores especialistas


<u>PEDIATRIC EMERGENCY MEDICINE</u>		<u>PEDIATRIC EMERGENCY MEDICINE</u>	
<p>TRAN, THERESA <i>Provider ID: 301834</i> <i>Board Certified Specialty: No</i></p> <p> 3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 966-8800</i>  <i>After Hours Phone: (858) 966-8800</i> <i>Provider Gender: Female</i> <i>NPI: 1417496985</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish, Vietnamese</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p> 3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 576-1700</i>  <i>After Hours Phone: (858) 576-1700</i> <i>Provider Gender: Male</i> <i>NPI: 1982792065</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p><i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: Rady Childrens Health Network</i></p>	<p><u>PEDIATRIC EMERGENCY MEDICINE</u></p> <p>VAIDYA, KAMALA <i>Provider ID: 205811</i> <i>Board Certified Specialty: No</i></p> <p> 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105  <i>Phone: (619) 280-2905</i> <i>Fax: (619) 283-1614</i>  <i>After Hours Phone: (619) 280-2905</i> <i>Provider Gender: Female</i> <i>NPI: 1083840920</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL):</i></p>
<u>PEDIATRIC EMERGENCY MEDICINE</u>		<u>PEDIATRIC EMERGENCY MEDICINE</u>	
<p>TRAUT, JOEL <i>Provider ID: 205475</i> <i>Board Certified Specialty: No</i></p>	<p>ULRICH, STACEY <i>Provider ID: 205847</i> <i>Board Certified Specialty: No</i></p> <p> 3020 CHILDRENS WAY SAN DIEGO, CA 92123  <i>Phone: (858) 966-8036</i>  <i>After Hours Phone: (858) 966-8036</i> <i>Provider Gender: Female</i> <i>NPI: 1619049236</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i></p>		

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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

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 Network

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

WANG, EMILY

Provider ID: 265954

Board Certified Specialty: No

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1427142363

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 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

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D. Directorio de proveedores especialistas

Min/Max 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


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

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D. Directorio de proveedores especialistas

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

PEDIATRIC GASTROENTEROLOGY


CHU, CHRISTOPHER

Provider ID: 301639


Board Certified Specialty: No

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003


Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO, UCSD MEDICAL CTR 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

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):

 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

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D. Directorio de proveedores especialistas

IPA: Rady Childrens Health Network

PEDIATRIC
GASTROENTEROLOGY


LIN, TOM

Provider ID: 297707

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123


 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858) 966-4003

Provider Gender: Male

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





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.




D. Directorio de proveedores especialistas

 *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 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

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D. Directorio de proveedores especialistas

Provider ID: 206173

Board Certified Specialty: No

3010 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5811

Fax: (858) 966-8035

After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1780813923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 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

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D. Directorio de proveedores especialistas

PROVIDER

 Hours: M-F 8AM-5PM
 Website: N/A
IPA: Rady Childrens Health Network


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, 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

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D. Directorio de proveedores especialistas

CHILDRENS HOSPITAL 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

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

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D. Directorio de proveedores especialistas

 Phone: (858) 966-8052
Fax: (858) 966-7789
 After Hours Phone: (858) 966-8052
Provider Gender: Female
NPI: 1255514618
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 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: 1811919244
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 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

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D. Directorio de proveedores especialistas

UCSF, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas

 *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

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

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D. Directorio de proveedores especialistas




 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5846
 Fax: (858) 966-8457
 After Hours Phone: (858)
966-5846
Provider Gender: Male
NPI: 1699123927


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hebrew
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 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

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D. Directorio de proveedores especialistas

Network

PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 206123

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 569-9052

After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1649222340

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

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

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D. Directorio de proveedores especialistas

American Sign Language (ASL): **SHEETS, ROBERT**

N

 **Accessibility:** CONTACT PROVIDER


 **Hours:** M-F 8AM-5PM


 **Website:** N/A

IPA: Rady Childrens Health Network


Provider ID: 255900

Board Certified Specialty: No

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123


 **Phone:** (858) 966-8082


Fax: (858) 966-4067

 **After Hours Phone:** (858) 966-8082

Provider Gender: Male

NPI: 1013088772

 **Provider English Spoken:** Y

 **Provider Language(s) Spoken:** Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 8AM-4:30PM

 **Website:** N/A


IPA: Rady Childrens Health

Network

 **After Hours Phone:** (858) 966-7484

Provider Gender: Male

NPI: 1619083961

 **Provider English Spoken:** Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 8AM-5PM

 **Website:** N/A

IPA: Rady Childrens Health Network


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


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


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


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D. Directorio de proveedores especialistas

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302344

Board Certified Specialty: No

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1437786944


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas

Provider ID: 205965

Board Certified Specialty: No

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1902983752

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

<p align="center">PEDIATRICS</p> <p>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</p>	<p>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</p>	<p> Website: N/A IPA: Rady Childrens Health Network</p>
<p align="center">PEDIATRICS</p> <p>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</p>	<p align="center">PEDIATRICS</p> <p>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</p>	<p align="center">PEDIATRICS</p> <p>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</p>
<p align="center">PEDIATRICS</p>		

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

GIBONEY, JENNIFER

Provider ID: 296241

Board Certified Specialty: No

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619) 280-2058

Provider Gender: Female

NPI: 1275895849

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 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

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D. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): N
 Website: N/A
 IPA: Rady Childrens Health Network

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

IPA: Rady Childrens Health 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

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D. Directorio de proveedores especialistas

NPI: 1912345307

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1043673528

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


HOLLYWOOD PRESBYTERIAN
MED CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max 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

PIERCE, HEATHER

Provider ID: 205701

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1699955542

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 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

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D. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max 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. Directorio de proveedores especialistas


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 MERCY 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

DIEGO


Medi-Cal Open Panel: Yes

Min/Max 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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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas




 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

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D. Directorio de proveedores especialistas

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: 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

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D. Directorio de proveedores especialistas

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

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

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. Directorio de proveedores especialistas

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):

 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):

 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. Directorio de proveedores especialistas

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

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: 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

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

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 256639

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (858) 453-1469

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780851253

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/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: 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




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D. Directorio de proveedores especialistas


 *Provider English 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*

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D. Directorio de proveedores especialistas

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: 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

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

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. Directorio de proveedores especialistas




 Hours: M-F 9AM-5PM
 Website: N/A
 IPA: IHP of Southern Cal-PHP

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

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: 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

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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

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


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. Directorio de proveedores especialistas


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

 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: 213750

Board Certified Specialty: No

 9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710234273

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


PSYCHOLOGIST


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


SCHELLINGER, KRISTON

Provider ID: 213752

Board Certified Specialty: No

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (858) 246-1979

 After Hours Phone: (858)
246-1979

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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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: 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

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


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

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D. Directorio de proveedores especialistas

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



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D. Directorio de proveedores especialistas

 *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




























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D. Directorio de proveedores especialistas

<p> 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 8:30AM-5PM 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 Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5PM Website: N/A IPA: Community Care IPA LLC, Imperial Health Holdings Medical Group-SD </p>	<p> N Accessibility: CONTACT PROVIDER Website: N/A IPA: Imperial Health Holdings Medical Group-SD </p>
<hr/>		
<u>RADIATION ONCOLOGY</u>		
<p> HOOPEES, DAVID Provider ID: 269725 Board Certified Specialty: No 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127 Phone: (858) 649-5100 Fax: (858) 649-5099 After Hours Phone: (858) 649-5100 Provider Gender: Male NPI: 1962520080 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N </p>	<p> <u>RADIATION ONCOLOGY</u> MURPHY, JAMES Provider ID: 262401 Board Certified Specialty: No 16918 DOVE CANYON RD STE 103 SAN DIEGO, CA 92127 Phone: (559) 447-4949 Fax: (559) 447-4925 After Hours Phone: (559) 447-4949 Provider Gender: Male NPI: 1730382631 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): </p>	<p> <u>RADIATION ONCOLOGY</u> VOLPP, PAUL Provider ID: 221105 Board Certified Specialty: No 3075 HEALTH CENTER DR SAN DIEGO, CA 92123 Phone: (858) 939-5010 Fax: (858) 939-5021 After Hours Phone: (858) 939-5010 Provider Gender: Male NPI: 1225186232 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER Medi-Cal Open Panel: Yes Min/Max Age: 19\100 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Community Care IPA LLC </p>








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D. Directorio de proveedores especialistas




<p>RADIATION ONCOLOGY</p> <p>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</p>	<p> 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</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  Website: N/A IPA: UCSD Medical Group</p>
<p>RADIOLOGY DIAGNOSTIC</p> <p>BERMAN, ZACHARY Provider ID: 304163 Board Certified Specialty: No  6655 ALVARADO RD SAN DIEGO, CA 92120</p>	<p>RADIOLOGY DIAGNOSTIC</p> <p>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</p>	<p>RADIOLOGY DIAGNOSTIC</p> <p>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</p>





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D. Directorio de proveedores especialistas



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: 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
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

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

 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
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. Directorio de proveedores especialistas

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: 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

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

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

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D. Directorio de proveedores especialistas

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: 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):
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):

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D. Directorio de proveedores especialistas

N

 **Accessibility: CONTACT PROVIDER**

 **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**

 **Website: N/A**

IPA: UCSD Medical Group

 **Hours: M-F 8AM-5PM**

 **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

GRISSOM, MURRAY

Provider ID: 271567

Board Certified Specialty: No

 200 W ARBOR DR
SAN DIEGO, CA 92103

 **Phone: (800) 926-8273**

Fax: (888) 539-8781

 **After Hours Phone: (800) 926-8273**

Provider Gender: Male

NPI: 1720465396

 **Provider English Spoken: Y**
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, Stanford Health

Care, STANFORD HEALTH


CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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D. Directorio de proveedores especialistas

 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: 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


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


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

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D. Directorio de proveedores especialistas

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: 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

JAZBEH, SAMMER

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D. Directorio de proveedores especialistas

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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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: 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

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

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):

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D. Directorio de proveedores especialistas

<p>N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group</p> <hr/> <p>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):</p>	<p>NPI: 1679000806  Provider English Spoken: Y Cultural Competency: N Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL):</p> <p>N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group</p> <hr/> <p>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):</p>	<p>IPA: UCSD Medical Group</p> <hr/> <p>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):</p> <p>N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group</p> <hr/> <p>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</p>
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Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

☎ 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: 299948

Board Certified Specialty: No

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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:

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas


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: 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

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D. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*
 *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): N

 *Accessibility: CONTACT PROVIDER*
 *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




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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*

 *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

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *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. Directorio de proveedores especialistas

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: 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

VAKILIAN, SIAVOSH

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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

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

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: 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)

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D. Directorio de proveedores especialistas

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

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

🕒 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

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: 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

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


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D. Directorio de proveedores especialistas

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


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


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: 258304

Board Certified Specialty: No

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780018416

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR







Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):




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D. Directorio de proveedores especialistas

<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p><i>Provider ID: 279194</i> <i>Board Certified Specialty: No</i>  16950 VIA TAZON SAN DIEGO, CA 92127  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i></p>	<p><i>277-2277</i> <i>Provider Gender: Male</i> <i>NPI: 1710193602</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Arabic, Armenian, Spanish</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 5\None</i> <i>American Sign Language (ASL): N</i></p>
<u>REGISTERED PHYSICAL THERAPIST</u>		
<p>BUNOSKY, ABIGAIL <i>Provider ID: 246022</i> <i>Board Certified Specialty: No</i>  200 W ARBOR DR SAN DIEGO, CA 92103  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Female</i> <i>NPI: 1780018416</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD MEDICAL CTR</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p>	<p><i>Provider Gender: Male</i> <i>NPI: 1639693187</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></p>
<u>REGISTERED PHYSICAL THERAPIST</u>		
<p>CORTEZ, AARON  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p>COSTELLO, MARK <i>Provider ID: 295634</i> <i>Board Certified Specialty: No</i>  7510 CLAIREMONT MESA BLVD STE 103 SAN DIEGO, CA 92111  <i>Phone: (858) 277-2277</i> <i>Fax: (408) 945-4018</i>  <i>After Hours Phone: (858)</i></p>	<p>DANG, ERIC <i>Provider ID: 258363</i> <i>Board Certified Specialty: No</i>  8929 UNIVERSITY CENTER LN STE 200 SAN DIEGO, CA 92122  <i>Phone: (858) 543-3333</i> <i>Fax: (858) 657-1809</i>  <i>After Hours Phone: (858) 543-3333</i> <i>Provider Gender: Male</i> <i>NPI: 1891237756</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p>





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D. Directorio de proveedores especialistas




 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. Directorio de proveedores especialistas

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

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

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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas


 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
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. Directorio de proveedores especialistas

 *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: 296930
Board Certified Specialty: No



 *9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123*
 *Phone: (877) 757-8353*
Fax: (818) 357-2505

 *After Hours Phone: (877)
757-8353*

Provider Gender: Female
NPI: 1063660165

 *Provider English Spoken: Y*



Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\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: 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

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

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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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: 296585

Board Certified Specialty: No

9655 GRANITE RIDGE DR
STE 200

SAN DIEGO, CA 92123

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1275021438

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\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

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

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D. Directorio de proveedores especialistas

 *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: 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 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

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

 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

 Website: N/A

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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
PROVIDER

Hours: M-F 8AM-5PM

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


D. Directorio de proveedores especialistas

 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 PROVIDER

 Hours: M-F 8AM-5PM

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D. Directorio de proveedores especialistas


 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: 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

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

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

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D. Directorio de proveedores especialistas

HEALTHCARE CTR, KERN
MEDICAL CENTER


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,
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

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

BERUMEN, JENNIFER

Provider ID: 260052

Board Certified Specialty: No

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1558566372

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health
Network


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

BRODERICK, RYAN

Provider ID: 286342

Board Certified Specialty: No

 4303 LA JOLLA VILLAGE

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D. Directorio de proveedores especialistas

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: 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

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

IPA: Rady Childrens Health
Network, UCSD Medical Group

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D. Directorio de proveedores especialistas

<p>SURGERY GENERAL</p> <p>CASILLAS BERUMEN, SERGIO Provider ID: 304608 Board Certified Specialty: No</p> <p>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</p> <p>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</p>	<p>Board Certified Specialty: No</p> <p>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</p> <p>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</p>	<p>Fax: (858) 966-7712</p> <p>After Hours Phone: (858) 966-7711 Provider Gender: Male NPI: 1407010556</p> <p>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</p>
<p>SURGERY GENERAL</p> <p>CASILLAS BERUMEN, SERGIO Provider ID: 304609</p>	<p>SURGERY GENERAL</p> <p>FAIRBANKS, TIMOTHY Provider ID: 260842 Board Certified Specialty: No</p> <p>3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123 Phone: (858) 966-7711</p>	<p>SURGERY GENERAL</p> <p>HORGAN, SANTIAGO Provider ID: 286367 Board Certified Specialty: No</p> <p>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</p>

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D. Directorio de proveedores especialistas

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: 286379

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 471-0700

After Hours Phone: (619)
471-0700

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/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

Board Certified Specialty: No

4520 EXECUTIVE DR STE 111

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D. Directorio de proveedores especialistas

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: 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

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

MUELLER, GEORGE

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D. Directorio de proveedores especialistas

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

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: 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

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

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D. Directorio de proveedores especialistas

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

CHULA VISTA, Sharp

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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)
Spoken: Hebrew, Spanish

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D. Directorio de proveedores especialistas

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

JOLLA JOHN SALLY

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D. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 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: 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

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

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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

Min/Max 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. Directorio de proveedores especialistas


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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: 299909
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1407380512
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 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

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D. Directorio de proveedores especialistas

 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: 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 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 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. Directorio de proveedores especialistas




 *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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

 *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: 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

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*

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

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






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D. Directorio de proveedores especialistas

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

KOLB, FREDERIC
 Provider ID: 246239
 Board Certified Specialty: No
 200 W ARBOR DR
 SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
 926-8273
 Provider Gender: Female
 NPI: 1790341832
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: French
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\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


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. Directorio de proveedores especialistas

 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: 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 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: 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 THORACIC




FOX, KENNETH

Provider ID: 257841

Board Certified Specialty: No

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D. Directorio de proveedores especialistas

 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




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas





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. Directorio de proveedores especialistas

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: 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

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

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. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

American Sign Language (ASL): _____

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


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
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

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,
IHP of Southern Cal-PHP


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

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D. Directorio de proveedores especialistas

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

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

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D. Directorio de proveedores especialistas

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 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801522859

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\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 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)

736-6767

Provider Gender: Female

NPI: 1659504264

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1639673858

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER









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D. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas


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: 291583

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)

736-6767

Provider Gender: Male

NPI: 1679733760

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-8PM
SA 8AM-8PM

 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

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D. Directorio de proveedores especialistas

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

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 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740





 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1811307051






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D. Directorio de proveedores especialistas

 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

Provider ID: 303025

Board Certified Specialty: No

150 VALPRED A RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1174774723

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 16\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. Directorio de proveedores especialistas

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,

IHP of Southern Cal-PHP

PEDIATRICS


LUM HO, RACHEL

Provider ID: 303150

Board Certified Specialty: No

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6797

 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1215469283

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR


MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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


LUM HO, RACHEL

Provider ID: 304047

Board Certified Specialty: No

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6797

 After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1215469283

 Provider English Spoken: Y


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D. Directorio de proveedores especialistas

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

POSADAS, EMERITO

Provider ID: 257536
Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767


Fax: (760) 566-1501

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1720093198

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): 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 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1023033156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-6PM

SA 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP

PHYSICIANS ASSISTANT

CELESTINO, MISH EL

Board Certified Specialty: No

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578263760

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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. Directorio de proveedores especialistas

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, LYNDA


Provider ID: 299716

Board Certified Specialty: No

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D. Directorio de proveedores especialistas

 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

N

 Accessibility: CONTACT

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D. Directorio de proveedores especialistas

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 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1710110416
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760)

736-6767
Provider Gender: Male
NPI: 1720265614
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\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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D. Directorio de proveedores especialistas

 *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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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






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D. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

<p style="text-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 style="text-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>N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: IHP of Southern Cal-PHP</p>
<p style="text-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 style="text-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 style="text-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 style="text-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. Directorio de proveedores especialistas

 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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D. Directorio de proveedores especialistas

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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D. Directorio de proveedores especialistas

 *Provider English 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. Directorio de proveedores especialistas

 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

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D. Directorio de proveedores especialistas

 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: 303929

Board Certified Specialty: No

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y
Cultural Competency: N

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D. Directorio de proveedores especialistas

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: 303928

 517 N HORNE ST
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\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

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. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas


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. Directorio de proveedores especialistas

 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. Directorio de proveedores especialistas





 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. Directorio de proveedores especialistas

<p>PRACTITIONER</p> <p>NICHOLAS, ESTELA <i>Provider ID: 239866</i> <i>Board Certified Specialty: No</i>  1000 VALE TERRACE DR VISTA, CA 92084  <i>Phone: (760) 631-5000</i> <i>Fax: (760) 414-3892</i>  <i>After Hours Phone: (760) 631-5000</i> <i>Provider Gender: Female</i> <i>NPI: 1558384792</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M 8AM-5PM TU-TH 8AM-8PM F 8AM-5PM SA 9AM-4PM</i>  <i>Website: N/A</i> <i>IPA: Community Care IPA LLC</i></p>	 <i>After Hours Phone: (760) 631-5000</i> <i>Provider Gender: Female</i> <i>NPI: 1619384351</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 12\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM SA 9AM-4PM</i>  <i>Website: N/A</i> <i>IPA: Community Care IPA LLC</i>	<p><i>N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: TU-W 0PM-8PM</i>  <i>Website: N/A</i> <i>IPA: IHP of Southern Cal-PHP</i></p>
<p>CERTIFIED NURSE PRACTITIONER</p> <p>PRITZKER, JOELY <i>Provider ID: 239773</i> <i>Board Certified Specialty: No</i>  1000 VALE TERRACE DR VISTA, CA 92084  <i>Phone: (760) 631-5000</i> <i>Fax: (760) 414-3892</i></p>	<p>CERTIFIED NURSE PRACTITIONER</p> <p>SHAHBAZ, LINNAE <i>Provider ID: 304820</i> <i>Board Certified Specialty: No</i>  1000 VALE TERRACE DR VISTA, CA 92084  <i>Phone: (760) 631-5000</i> <i>Fax: (760) 414-3892</i>  <i>After Hours Phone: (760) 631-5000</i> <i>Provider Gender: Female</i> <i>NPI: 1427712215</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL):</i></p>	<p>CERTIFIED NURSE PRACTITIONER</p> <p>SRILASAK, MICHELE <i>Provider ID: 281857</i> <i>Board Certified Specialty: No</i>  910 SYCAMORE AVE STE 102 VISTA, CA 92081  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Female</i> <i>NPI: 1265487326</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>

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D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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: 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: 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: 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. Directorio de proveedores especialistas

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: 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


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


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: 290220

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)

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D. Directorio de proveedores especialistas

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

CHIROPRACTOR

JU, NATHANIEL
 Provider ID: 290222
 Board Certified Specialty: No
 134 GRAPEVINE RD
 VISTA, CA 92083
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760)
 631-5000
 Provider Gender: Male
 NPI: 1972883882
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Chinese
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\None
 American Sign Language (ASL):

N
 Accessibility: CONTACT
 PROVIDER
 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. Directorio de proveedores especialistas

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 305346

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: 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):
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

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):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

D. Directorio de proveedores especialistas

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. Directorio de proveedores especialistas

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

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D. Directorio de proveedores especialistas

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: 290209

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

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D. Directorio de proveedores especialistas

 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

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: 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: 290208

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,


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D. Directorio de proveedores especialistas

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

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

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

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

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D. Directorio de proveedores especialistas

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: 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: 290236

Board Certified Specialty: No

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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

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

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D. Directorio de proveedores especialistas


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

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

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 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: 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

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D. Directorio de proveedores especialistas

 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: 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

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D. Directorio de proveedores especialistas

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


PODIATRIST

MILLER, JULIE

Provider ID: 305464

Board Certified Specialty: No

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619115664

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 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

 After Hours Phone: (800)

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D. Directorio de proveedores especialistas

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


Min/Max Age: 0\None

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D. Directorio de proveedores especialistas

American Sign Language (ASL): Board Certified Specialty: No
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

 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):
N

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D. Directorio de proveedores especialistas

 *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 PROVIDER*
 *Hours: M-F 8AM-5PM*

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D. Directorio de proveedores especialistas

 Website: N/A
IPA: UCSD Medical Group


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E. Directorio de hospitales: hospital general de atención aguda

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. Directorio de hospitales: hospital general de atención aguda

 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.paradisevalleyhospital.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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


E. Directorio de hospitales: hospital general de atención aguda

 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-memorial-hospital-encinitas

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. Directorio de hospitales: hospital general de atención aguda

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

E. Directorio de hospitales: hospital general de atención aguda

 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 Birthing Friendly: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO
 Hours: 24 Hours / 7
days/week
License Number: 090000101
NPI: 1497021265
 Website: N/A
American Sign Language (ASL):
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>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

F. Atención a largo plazo (LTC) y centros de enfermería especializada (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. Atención a largo plazo (LTC) y centros de enfermería especializada (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. Atención a largo plazo (LTC) y centros de enfermería especializada (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://sometersubacute.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. Atención a largo plazo (LTC) y centros de enfermería especializada (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. Atención a largo plazo (LTC) y centros de enfermería especializada (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):

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. Atención a largo plazo (LTC) y centros de enfermería especializada (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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


F. Atención a largo plazo (LTC) y centros de enfermería especializada (SNF)


- N**
 *Accessibility: CONTACT PROVIDER*
- CARE MERIDIAN LA MESA**
 Provider ID: 173379
 5640 AZTEC DR
 LA MESA, CA 91942
 Phone: (949) 263-6632
 Fax: (619) 465-0019
 After Hours Phone: (949) 263-6632
 Accepting New Patients: No
 NPI: 1235404674
 Website: www.neurorestorative.com
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- COUNTRY MANOR LA MESA HEALTHCARE CENTER**
 Provider ID: 172023
 5696 LAKE MURRAY BLVD
 LA MESA, CA 91942
 Phone: (619) 460-7871
 After Hours Phone: (619) 460-7871
 Accepting New Patients: No
 NPI: 1457345001
 Website: N/A
 Credentials and/or certifications:
-  Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- GROSSMONT HOSPITAL DP SNF**
 Provider ID: 172643
 5555 GROSSMONT CENTER DR
 LA MESA, CA 91942
 Phone: (619) 740-4110
 After Hours Phone: (619) 740-4110
 Accepting New Patients: No
 NPI: 1417930249
 Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- GROSSMONT POST ACUTE CARE**
 Provider ID: 310488
 8787 CENTER DR
 LA MESA, CA 91942
 Phone: (619) 460-4444
 Fax: (619) 713-5116
 After Hours Phone: (619) 460-4444
 Accepting New Patients: No
 NPI: 1689077588
 Website: <http://grossmontpostacute.com>
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- HILLDALE HABILITATION CENTER**
 Provider ID: 527671
 7979 LA MESA BLVD
 LA MESA, CA 91942
 Phone: (619) 465-8010
 Fax: (619) 465-8348
 After Hours Phone: (619) 465-8010
 Accepting New Patients: No
 Hours: M-F 8AM-5PM
 NPI: 1073736427
 Website: N/A
 Credentials and/or certifications:
 Site English Spoken: Y
 Cultural Competency: N
 American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- LA MESA HEALTHCARE CTR**

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F. Atención a largo plazo (LTC) y centros de enfermería especializada (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. Atención a largo plazo (LTC) y centros de enfermería especializada (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

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F. Atención a largo plazo (LTC) y centros de enfermería especializada (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. Atención a largo plazo (LTC) y centros de enfermería especializada (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. Atención a largo plazo (LTC) y centros de enfermería especializada (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):
N

Accessibility: CONTACT
PROVIDER

JACOB HEALTH CARE CENTER LLC

Provider ID: 172617

4075 54TH ST

SAN DIEGO, CA 92105

Phone: (619) 582-5168

Fax: (619) 325-0194

After Hours Phone: (619)
582-5168

Accepting New Patients: No

NPI: 1881684900

Website: www.jacobhealthcare.com

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MISSION HILLS POST ACUTE CARE

Provider ID: 339053

3680 REYNARD WAY

SAN DIEGO, CA 92103

Phone: (619) 297-4484

Fax: (855) 214-6992

After Hours Phone: (619)
297-4484

Accepting New Patients: No
NPI: 1669875563

Website: <http://missionhillspostacute.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

RADY CHILDRENS

CONVALESCENT HOSPITAL

Provider ID: 172200

8022 BIRMINGHAM DR

SAN DIEGO, CA 92123

Phone: (858) 966-5833

Fax: (858) 966-8558

After Hours Phone: (858)
966-5833

Accepting New Patients: No
NPI: 1992881478

Website: www.rchsd.org
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST

SAN DIEGO, CA 92139

Phone: (619) 475-2211

Fax: (619) 479-9126

After Hours Phone: (619)
475-2211

Accepting New Patients: No
NPI: 1255499174

Website: <http://reovista.com>

Credentials and/or

certifications:

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































Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT






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F. Atención a largo plazo (LTC) y centros de enfermería especializada (SNF)





PROVIDER	N	certifications:
<p>ST PAULS HEALTH CARE CENTER Provider ID: 288531  235 NUTMEG ST SAN DIEGO, CA 92103  Phone: (619) 677-3895  After Hours Phone: (619) 677-3895 Accepting New Patients: No NPI: 1972619104  Website: N/A Credentials and/or certifications: CMS  Site English Spoken: Y Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p>THE SPRINGS AT PACIFIC REGENT Provider ID: 172008  3884 NOBEL DR SAN DIEGO, CA 92122  Phone: (858) 625-8700 Fax: (858) 625-8777  After Hours Phone: (858) 625-8700 Accepting New Patients: No NPI: 1003198342  Website: N/A Credentials and/or certifications:  Site English Spoken: Y Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p> Site English Spoken: Y  Site Languages(s) Spoken: Tagalog, Mandarin, Russian, Vietnamese, Farsi, Spanish Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>
<p>THE PAVILION AT OCEAN POINT Provider ID: 262151  3202 DUKE ST SAN DIEGO, CA 92110  Phone: (619) 224-4141  After Hours Phone: (619) 224-4141 Accepting New Patients: No NPI: 1538174990  Website: N/A Credentials and/or certifications:  Site English Spoken: Y Cultural Competency: N American Sign Language (ASL):</p>	<p>UNIVERSITY CARE CENTER Provider ID: 172024  5602 UNIVERSITY AVE SAN DIEGO, CA 92105  Phone: (619) 583-1993 Fax: (619) 501-3559  After Hours Phone: (619) 583-1993 Accepting New Patients: No NPI: 1871522672  Website: http://universitycarecenter.com Credentials and/or</p>	<p>VILLA RANCHO BERNARDO CARE CENTER Provider ID: 172009  15720 BERNARDO CENTER DR SAN DIEGO, CA 92127  Phone: (858) 672-3900 Fax: (858) 672-9247  After Hours Phone: (858) 672-3900 Accepting New Patients: No NPI: 1518063437  Website: www.villaranchobernardo.com Credentials and/or certifications:  Site English Spoken: Y Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>
<p>certifications:  Site English Spoken: Y Cultural Competency: N American Sign Language (ASL):</p>	<p>WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL Provider ID: 172012</p>	<p>certifications:  Site English Spoken: Y Cultural Competency: N American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>

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F. Atención a largo plazo (LTC) y centros de enfermería especializada (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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

F. Atención a largo plazo (LTC) y centros de enfermería especializada (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: covivingmountmigu.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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

F. Atención a largo plazo (LTC) y centros de enfermería especializada (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. Atención a largo plazo (LTC) y centros de enfermería especializada (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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

G. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

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>

EL CAJON

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/westernadhcec/contact-us>

MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE
EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619) 444-1522

Accepting New Patients: No

Hours: M-F 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>

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

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G. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

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

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

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G. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

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

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

Facility has access to skilled 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-pacific.com

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


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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


H. Servicios de apoyo en el hogar (IHSS) del condado

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

 5560 OVERLAND AVE
SAN DIEGO, CA 92123

 Phone: (858) 495-5885


License Number: 1710308986

Accessibility: CONTACT

PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

 *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

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I. Directorio de salud mental

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


I. Directorio de salud mental


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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental


 *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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


I. Directorio de salud mental

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

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I. Directorio de salud mental


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 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

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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I. Directorio de salud mental

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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I. Directorio de salud mental

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

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I. Directorio de salud mental

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

 *Provider English Spoken: Y*


 *German, Spanish*

Cultural Competency: N

ANDREA VALLEZ-BARLAM


 488 E VALLEY PKWY STE 404

ESCONDIDO, CA 92025

 *Phone: (760) 466-9800*


Fax: (858) 633-4693

 *After Hours Phone: (760) 466-9800*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

 *Site Language(s) Spoken: German, Spanish*

TDD: U


Min/Max Age: 0\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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I. Directorio de salud mental

 *Provider English Spoken: Y*


 *Spanish*

Cultural Competency: N

CLAUDIA J CARDOZA

 1328 S MISSION RD

FALLBROOK, CA 92028

 *Phone: (760) 451-4730*


Fax: (760) 457-4700

 *After Hours Phone: (760) 451-4730*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

 *Site Language(s) Spoken: Spanish*


TDD: U

Min/Max Age: 6\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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I. Directorio de salud mental

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

 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


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*

BOUTELLE, KERRI

Provider Gender: Male

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental


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

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
STE C101

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I. Directorio de salud mental

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

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): DAWN M EICHEN
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

 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

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

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I. Directorio de salud mental


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

ELLEDDGE, LINDSAY

Provider Gender: Female

License Number: LCS96136


NPI: 1619428828

 Provider English Spoken: Y
Cultural Competency: N

LINDSAY E ELLEDGE

 8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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

American Sign Language (ASL): N

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I. Directorio de salud mental

 *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 KHAF AJA

 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


Provider Gender: Male

License Number: A124329

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I. Directorio de salud mental

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-CHESHER, TAMARA

Provider Gender: Female

License Number: PSY28678

NPI: 1043441165


 Provider English Spoken: Y

Cultural Competency: N


TAMARA R MAGINOT

CHESHER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 534-7792

Fax: (619) 471-9017

 After Hours Phone: (858)
534-7792

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


I. Directorio de salud mental

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
LA JOLLA, CA 92037

 Phone: (800) 826-8273

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I. Directorio de salud mental

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

 After Hours Phone: (858) 822-5881

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I. Directorio de salud mental

 Website: N/A

Accepting New Patients: 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

 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

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

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

American Sign Language (ASL): N

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I. Directorio de salud mental

 *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*
Cultural Competency: N

STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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

License Number: PSY26230

NPI: 1497139059

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I. Directorio de salud mental

 *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

NPI: 1649760356


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I. Directorio de salud mental


 *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

NPI: 1255937496

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I. Directorio de salud mental

 *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

NPI: 1932359445

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


I. Directorio de salud mental

 *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*

COOK, SHERYL

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

📍 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

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166





NPI: 1285170662

☐ Provider English Spoken: Y
Cultural Competency: N

VANESSA Y CRUZ

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I. Directorio de salud mental

 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

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

Site English Spoken: Y

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

 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

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

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I. Directorio de salud mental

MELENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

ADRIANA J MELENDEZ


 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

 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


 2210 MESA DR STE 5


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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
 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






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

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
Gender Restriction: No Gender

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

restriction

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

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

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

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

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I. Directorio de salud mental

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

 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-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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

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

POWAY

KULKARNI, NISHAT

Provider Gender: Male

License Number: A187134

NPI: 1669034732








Provider English Spoken: Y

Cultural Competency: N

NISHAT KULKARNI




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

 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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


I. Directorio de salud mental






 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 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 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 Language(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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

 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

 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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


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 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*

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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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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I. Directorio de salud mental

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

CIOBANU, COSMINA

Provider Gender: Female

License Number: A137628


NPI: 1285049932


 Provider English Spoken: Y
Cultural Competency: N

COSMINA S CIOBANU

 4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

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

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I. Directorio de salud mental

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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I. Directorio de salud mental

 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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I. Directorio de salud mental

 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

 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

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I. Directorio de salud mental

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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


TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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

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

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

N

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I. Directorio de salud mental

 *Accessibility: CONTACT 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

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I. Directorio de salud mental

NPI: 1881198554

 Provider English Spoken: Y
Cultural Competency: N

RICHARD R GARCIA

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0505

 After Hours Phone: (619)
234-2158

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\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 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

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





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I. Directorio de salud mental

 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

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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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


 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

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I. Directorio de salud mental








 *Arabic*
Cultural Competency: N
MICHAEL LABIB
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
Fax: (619) 785-3384
 *After Hours Phone: (619)*
662-4100
 *Website: N/A*
Accepting New Patients: Yes
Site English Spoken: Y
 *Site Languages(s) Spoken:*
Spanish
TDD: U
Min/Max Age: 0\None
Gender Restriction: No Gender
restriction
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F 8AM-5PM*


LAIDLAW, JOHN
Provider Gender: Male
License Number: MFC44560
NPI: 1689790073
 *Provider English Spoken: Y*
Cultural Competency: N
JOHN K LAIDLAW
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844)*
200-2426
 *Website: N/A*

Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\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
 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*

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*

LEDBETTER, ALEX
Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
 *Provider English Spoken: Y*
Cultural Competency: N
ALEX W LEDBETTER

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I. Directorio de salud mental

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 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

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): NPI: 1487026415

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

 Provider English Spoken: Y
Cultural Competency: N

SARAH E LINKE

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\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)

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I. Directorio de salud mental

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 *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

 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*

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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

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 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*

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

Provider Gender: Female


License Number: A152789


NPI: 1053682773


 Provider English Spoken: Y
Cultural Competency: N

SHAVON C MOORE

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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

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

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

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

 Provider English Spoken: Y

 Vietnamese


Cultural Competency: N


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


I. Directorio de salud mental

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

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

 Provider English Spoken: Y


 Vietnamese


Cultural Competency: N

HOANG A NGUYEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\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

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I. Directorio de salud mental

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

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

 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.





I. Directorio de salud mental

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8AM-5PM*

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

Provider Gender: Male

License Number: A168429

NPI: 1093178220

 *Provider English Spoken: Y*


 *French*

Cultural Competency: N

WALI Z QAYOUMI

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 *Phone: (619) 294-3746*

Fax: (888) 539-8781

 *After Hours Phone: (619)
294-3746*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\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

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I. Directorio de salud mental

 *Provider English Spoken: Y*
Cultural Competency: N

MARLA G RICHARD

 16950 VIA TAZON
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\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):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM*

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116


NPI: 1043653249

 *Provider English Spoken: Y*
Cultural Competency: N

CAROLYN M SAWYER

 3030 CHILDRENS WAY FL 4

SAN DIEGO, CA 92123

 *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

 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

 7920 FROST ST STE 200

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

SAN DIEGO, CA 92123
☎ Phone: (858) 246-0794
☎ Fax: (858) 496-9257
🕒 After Hours Phone: (858) 246-0794
🌐 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
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

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
📍 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

SERIO, TAYLOR

Provider Gender: Female


License Number: LCS107050

NPI: 1093217382

 Provider English Spoken: Y
Cultural Competency: N

TAYLOR L SERIO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\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

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I. Directorio de salud mental


 Hours: M-F 8AM-5PM

SOLORIO JR, ROBERTO

Provider Gender: Male

License Number: LCS102729


NPI: 1972088185


 Provider English Spoken: Y

Cultural Competency: N

ROBERTO SOLORIO JR

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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 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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental





 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



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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

TROYER, EMILY

Provider Gender: Female


License Number: A149101

NPI: 1326484437

 Provider English Spoken: Y
Cultural Competency: N

EMILY A TROYER

 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 Language(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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

WEISSMAN, CORY


Provider Gender: Male


License Number: A174625

NPI: 1528720661

 Provider English Spoken: Y
Cultural Competency: N

CORY R WEISSMAN

 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

 Hours: M-F
8:30AM-5:30PM

ZAYAS, MARIO

Provider Gender: Male

License Number: MFC111273


NPI: 1275943557

 Provider English Spoken: Y
Cultural Competency: N

MARIO E ZAYAS

 3025 BEYER BLVD STE
E-101

SAN DIEGO, CA 92154

 Phone: (619) 662-4100

Fax: (619) 428-5535

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

PROVIDER

ARIELLA, LYNDA

Provider Gender: Female

License Number: PSY19450

NPI: 1073518965

Provider English Spoken: Y

Cultural Competency: N

LYNDA R ARIELLA

150 VALPRED A RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 5\50

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 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

FLYNN, DANIELLE

Provider Gender: Female

License Number: PSY26184

NPI: 1477785137

Provider English Spoken: Y

Cultural Competency: N

DANIELLE I FLYNN

150 VALPRED A RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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 A 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




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I. Directorio de salud mental






 *Hindi*
Cultural Competency: N
SYED IMAM
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
 Site Language(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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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: 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 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

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

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I. Directorio de salud mental

 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.



I. Directorio de salud mental

 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



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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

Fax: (619) 205-6341

☎ After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\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 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

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

📍 1000 VALE TERRACE DR

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I. Directorio de salud mental

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

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
☑ Provider English Spoken: Y
☑ Spanish
Cultural Competency: N
AZUCENA ACOSTA
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
🌐 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U

Min/Max Age: 0\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

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) 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






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I. Directorio de salud mental

 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)
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

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
License Number: LCS87166
NPI: 1285170662
 Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 4\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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental


 *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*
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

 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*

F 9AM-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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

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

 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

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361


 Provider English Spoken: Y


 Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\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

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I. Directorio de salud mental

PROVIDER

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

NEVILLE, MARGARET

Provider Gender: Female


License Number: LCS82407

NPI: 1073682407

 Provider English Spoken: Y
Cultural Competency: N

MARGARET R NEVILLE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:
Arabic, Chinese, Lithuanian,
Farsi, Spanish, Tagalog,
Urdu, Vietnamese


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 8AM-5PM
SA 8AM-4PM

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

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I. Directorio de salud mental

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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

I. Directorio de salud mental

 *Provider English Spoken: Y* *TDD: U*
Cultural Competency: N *Min/Max Age: 0\None*
CARLENE WILSON *Gender Restriction: No Gender restriction*
 134 GRAPEVINE RD
VISTA, CA 92083
 *Phone: (760) 631-5000* *American Sign Language (ASL): N*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*  *Accessibility: CONTACT PROVIDER*
 *Website: N/A*  *Hours: M-TH 8AM-8PM*
Accepting New Patients: Yes *F 8AM-5PM*
Site English Spoken: Y *SA 9AM-4PM*
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

ALPINE

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max 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):

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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Public transportation (within 1/2 mile from Site): 1U</p> <p> 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</p> <p>KALBAKJI, NATALY, OD Provider Gender: Female License Number: 34943 NPI: 1700556438 Provider English Spoken: Y</p> <p> Arabic Cultural Competency: Y</p> <p>WEST COAST EYE CARE</p> <p> 1620 ALPINE BLVD STE 117 ALPINE, CA 91901</p> <p> Phone: (619) 445-2687 Fax: (619) 445-0801</p> <p> After Hours Phone: (619) 445-2687</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>	<p>NPI: 1760473797 Provider English Spoken: Y</p> <p> Spanish Cultural Competency: Y</p> <p>WEST COAST EYE CARE</p> <p> 1620 ALPINE BLVD STE 117 ALPINE, CA 91901</p> <p> Phone: (619) 445-2687 Fax: (619) 445-0801</p> <p> After Hours Phone: (619) 445-2687</p> <p>Accepting New Patients: Yes</p> <p> 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</p> <p>WEST COAST EYE CARE</p> <p> 1620 ALPINE BLVD STE 117 ALPINE, CA 91901</p> <p> Phone: (619) 445-2687 Fax: (619) 445-0801</p> <p> After Hours Phone: (619) 445-2687</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>	<p> Arabic Cultural Competency: Y</p> <p>WEST COAST EYE CARE</p> <p> 1620 ALPINE BLVD STE 117 ALPINE, CA 91901</p> <p> Phone: (619) 445-2687 Fax: (619) 445-0801</p> <p> After Hours Phone: (619) 445-2687</p> <p>Accepting New Patients: Yes</p> <p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p> <p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p>	<p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p> <p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N</p> <p> Site English Spoken: Y Min/Max Age: 0\None Gender Restriction: No Gender restriction 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 9AM-5PM TU 10AM-6PM</p>	<p>W 9AM-5PM TH 8AM-5PM F 9AM-4PM</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</p> <p> Arabic Cultural Competency: Y</p> <p>WEST COAST EYE CARE</p> <p> 1620 ALPINE BLVD STE 117</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

American Sign Language (ASL):  Hours: M 9AM-5PM
N

F 8AM-6PM
SA 9AM-2PM

 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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

CHULA VISTA

CASTILLEJOS, DAVID, MD

Provider Gender: Male

License Number: A44482

NPI: 1558446401

Provider English Spoken: Y

Spanish, Portuguese, 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y


Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

NGUYEN, TRACY, OD

Provider Gender: Female
 License Number: 10859
 NPI: 1265596621
 Provider English Spoken: Y
 Vietnamese
 Cultural Competency: Y
 ESSENTIAL EYECARE
 OPTOMETRY
 345 F ST STE 240
 CHULA VISTA, CA 91910
 Phone: (858) 467-0655
 Fax: (619) 425-9797
 After Hours Phone: (858) 467-0655
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Vietnamese
 Min/Max 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-3PM

PLUCINIK, STANLEY, OD

Provider Gender: Male
 License Number: 35255
 NPI: 1124751417
 Provider English Spoken: Y
 Cultural Competency: Y
 CASTILLEJOS EYE INSTITUTE
 MED GROUP
 342 F ST
 CHULA VISTA, CA 91910
 Phone: (619) 422-1471
 Fax: (619) 271-7044
 After Hours Phone: (619) 422-1471
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: French, Spanish, Tagalog
 Min/Max 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

SCOVILL, ALEXANDRA, OD

Provider Gender: Female
 License Number: 33711
 NPI: 1184146094
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 CASTILLEJOS EYE INSTITUTE
 MED GROUP
 342 F ST
 CHULA VISTA, CA 91910
 Phone: (619) 422-1471
 Fax: (619) 271-7044
 After Hours Phone: (619) 422-1471

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: French, Spanish, Tagalog
 Min/Max 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

SOLIS, KEVIN, OD

Provider Gender: Male

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista


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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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): License Number: A124698

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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 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

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


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J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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):

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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




Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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


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J. Directorio de proveedores de la vista: servicios oculares y de la vista





 *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 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 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 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*

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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):

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):

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):

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista


Gender Restriction: No Gender restriction
 1/2 mile from Site): 1T

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

 Hours: M-F

8:30AM-4:30PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista

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


LE, TAM, OD

Provider Gender: Female

License Number: 12951

NPI: 1235268707


Provider English Spoken: Y

 Spanish, Vietnamese Cultural Competency: Y

TAM T LE OD INC

 1711 E VALLEY PKWY STE 109

ESCONDIDO, CA 92027


 Phone: (760) 737-6064

Fax: (760) 737-6064

 After Hours Phone: (760) 737-6064

Accepting New Patients: Yes


 Site English Spoken: Y

 Site 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-TH 9AM-5:30PM F 9AM-1PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

 Spanish


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max 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

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


Min/Max 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

 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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):

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:30AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026


 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

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


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):

 Accessibility: CONTACT
PROVIDER

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

Public transportation (within 1/2 mile from Site): IT

🕒 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): IT

🕒 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): IT

🕒 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): IT

🕒 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista


Min/Max 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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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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J. Directorio de proveedores de la vista: servicios oculares y de la vista


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):

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista



N

 **Accessibility: CONTACT PROVIDER**
Public transportation (within 1/2 mile from Site): 1U
 **Hours: M-F 8AM-5PM**


IMPERIAL BEACH

HANONO, HELFON, OD

Provider Gender: Male
License Number: 6681
NPI: 1619942034
Provider English Spoken: Y
 **Spanish**
Cultural Competency: Y
IMPERIAL BEACH
OPTOMETRY INC APC


 894 PALM AVE STE B
IMPERIAL BEACH, CA
91932
 **Phone: (619) 424-9333**
Fax: (619) 424-3356
 **After Hours Phone: (619) 424-9333**
Accepting New Patients: Yes
 **Site English Spoken: Y**
 **Site Languages(s) Spoken: Spanish**
Min/Max 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, 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**

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista



 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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max 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

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

 Hours: M-F 8AM-4:30PM

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

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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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 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-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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

MORRISON REYES, JOSHUA, MD

Provider Gender: Male


License Number: A125435


NPI: 1235366782

Provider English Spoken: Y

 Indonesian, Spanish
Cultural Competency: Y

ACUITY EYE GROUP

 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037


 Phone: (858) 457-3010

Fax: (858) 457-0028

 After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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:

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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):

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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):





























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J. Directorio de proveedores de la vista: servicios oculares y de la vista

<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> <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>CHANG, TOM, MD <i>Provider Gender: Male</i> <i>License Number: A69909</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>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

-  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
- CHIUI, 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
 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
DEAN, MOENA, OD
 Provider Gender: Female
 License Number: 33955

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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:

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista




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

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

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

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
 NPI: 1700556438

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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 PROVIDER

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

🗨️ Site Languages(s) Spoken:

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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 1/2 mile from Site): 1U

 Hours: M 10AM-5PM
TU-TH 9AM-6PM
F 10AM-5PM

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

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302


NPI: 1235857525

Provider English Spoken: Y


Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942


 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


Min/Max 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

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ 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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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):
N

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):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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, 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

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

PETERS, JAMIE, OD

Provider Gender: Female

License Number: 10724

NPI: 1073691077

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

 8235 UNIVERSITY AVE
LA MESA, CA 91942


 Phone: (619) 461-4913

Fax: (888) 509-6483

 After Hours Phone: (619)
461-4913

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista


Min/Max 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

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

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 restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 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

Cultural Competency: Y

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

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

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):

 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):

 Accessibility: CONTACT PROVIDER

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

📞 Phone: (619) 472-1010

Fax: (619) 479-5233

🕒 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken: Spanish

Min/Max 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

📞 Phone: (619) 470-2700


Fax: (619) 267-8221

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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): 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

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


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 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

KATZMAN, BARRY, MD

Provider Gender: Male








License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

 *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
 *Accessibility: CONTACT PROVIDER*
Public transportation (within

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista

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 1/2 mile from Site): 1U

 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

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

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

MENDOZA, RAYMUNDO, OD

Provider Gender: Male

License Number: 8150

NPI: 1306837760

Provider English Spoken: Y

Spanish

Cultural Competency: Y

NATIONAL CITY EYECARE

2403 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 475-2184

Fax: (619) 475-3917

After Hours Phone: (619) 475-2184

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max 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 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

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista


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 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


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

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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 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*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

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

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE
FG

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista


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





Cultural Competency: Y




NORTH COAST OPTOMETRY



 3915 MISSION AVE STE 2

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.





J. Directorio de proveedores de la vista: servicios oculares y de la vista


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
 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
 F 9AM-5PM

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 *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*


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

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*

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) 565-8822*

Accepting New Patients: Yes

 *Site English Spoken: Y*

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

Min/Max 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
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449

 After Hours Phone: (858)

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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
 Hours: M-F 10AM-7PM
 SA 10AM-7PM

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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


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 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

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


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J. Directorio de proveedores de la vista: servicios oculares y de la vista

 After Hours Phone: (619) 291-2020

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 10AM-7PM
SA 10AM-7PM

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, 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

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

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450


NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822
Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max 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

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

HO, HOANG, OD

Provider Gender: Male

License Number: 12582

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

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

HOM, GREGORY, OD

Provider Gender: Male

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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 9AM-4PM
 TU 7AM-1PM
 W-TH 10AM-7PM
 F 10AM-3PM
 SA 9AM-2PM

KALBAKJI, NATALY, OD
 Provider Gender: Female
 License Number: 34943
 NPI: 1700556438
 Provider English Spoken: Y
 Arabic
 Cultural Competency: Y
 WEST COAST EYE CARE
 4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max 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

KALBAKJI, NATALY, OD
 Provider Gender: Female
 License Number: 34943
 NPI: 1700556438
 Provider English Spoken: Y
 Arabic
 Cultural Competency: Y
 WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max 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

KATZMAN, BARRY, MD
 Provider Gender: Male
 License Number: A34834
 NPI: 1760473797
 Provider English Spoken: Y
 Spanish
 Cultural Competency: Y
 WEST COAST EYE CARE
 6945 EL CAJON BLVD
 SAN DIEGO, CA 92115
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600
 Accepting New Patients: Yes
 Site English Spoken: Y
 Min/Max 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

KATZMAN, BARRY, MD
 Provider Gender: Male
 License Number: A34834

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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 Languages(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

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

📞 Phone: (619) 543-6244

Fax: (619) 295-5034

🕒 After Hours Phone: (619) 543-6244

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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): 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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

<p> <i>Site Languages(s) Spoken: Spanish</i> <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i></p>	<p><i>Public transportation (within 1/2 mile from Site): 1T</i>  <i>Hours: M-F 9:30AM-6PM SA 9AM-3PM</i></p>	<p><i>License Number: 11166</i> <i>NPI: 1821001645</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: Y</i> OPTOM-EYES VISION CARE OPTOMETRY</p>
<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Public transportation (within 1/2 mile from Site): 1U</i>  <i>Hours: TU-F 9AM-3PM SA 10AM-2PM</i></p>	<p>LAU, KUEN CHINE, OD <i>Provider Gender: Male</i> <i>License Number: 11166</i> <i>NPI: 1821001645</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: Y</i> FASHION VALLEY EYE CARE OPTOMETR</p>	<p> 5638 MISSION CENTER RD STE 103 SAN DIEGO, CA 92108  <i>Phone: (619) 295-2900</i> <i>Fax: (888) 210-5799</i>  <i>After Hours Phone: (619) 295-2900</i></p>
<p>LAU, KUEN CHINE, OD <i>Provider Gender: Male</i> <i>License Number: 11166</i> <i>NPI: 1821001645</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: Y</i> OPTOM-EYES VISION CARE OPTOMETRY</p>	<p> 7007 FRIARS RD STE 351 SAN DIEGO, CA 92108  <i>Phone: (619) 291-2020</i> <i>Fax: (888) 210-5799</i>  <i>After Hours Phone: (619) 291-2020</i></p>	<p><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></p>
<p> 1555 PALM AVE STE A2 SAN DIEGO, CA 92154  <i>Phone: (619) 297-2020</i> <i>Fax: (888) 210-5799</i>  <i>After Hours Phone: (619) 297-2020</i></p>	<p><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></p>	<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Public transportation (within 1/2 mile from Site): 1U</i>  <i>Hours: M-F 9AM-5:30PM SA 9AM-3PM</i></p>
<p><i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Y</i> <i>Min/Max Age: 0\None</i> <i>Gender Restriction: No Gender restriction</i></p>	<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Public transportation (within 1/2 mile from Site): 1T</i>  <i>Hours: M-F 10AM-7PM SA 10AM-7PM</i></p>	<p>LAU, JANICE, OD <i>Provider Gender: Female</i> <i>License Number: 13037</i> <i>NPI: 1952453300</i> <i>Provider English Spoken: Y</i> <i>Cultural Competency: Y</i></p>
<p><i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i></p>	<p>LAU, KUEN CHINE, OD <i>Provider Gender: Male</i></p>	<p>SABRE SPRINGS OPTOMETRY  12650 SABRE SPGS PKWY</p>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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

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

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

 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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

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

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277







Provider English Spoken: Y

Cultural Competency: Y






UC SAN DIEGO HEALTH



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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


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, HOA PHUONG, OD

Provider Gender: Female
 License Number: 12630
 NPI: 1962439265
 Provider English Spoken: Y
 Vietnamese
 Cultural Competency: Y
 COLLEGE GROVE
 OPTOMETRY
 4560 COLLEGE AVE
 SAN DIEGO, CA 92115
 Phone: (619) 583-5744
 Fax: (619) 582-6112
 After Hours Phone: (619)
 583-5744
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

NGUYEN, JASMINE, OD

Provider Gender: Female

License Number: 11189

NPI: 1497896922

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

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

NGUYEN, KELVIN, OD

Provider Gender: Male

License Number: 11085

NPI: 1518923572

Provider English Spoken: Y


Spanish

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

NGUYEN, THANH, OD

Provider Gender: Female

License Number: 13126

NPI: 1992813323

Provider English Spoken: Y


Vietnamese

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

 12650 SABRE SPGS PKWY STE 203

SAN DIEGO, CA 92128

 Phone: (858) 748-1265

Fax: (844) 269-9527

 After Hours Phone: (858) 748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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
restriction


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-W 9AM-6PM
TH-F 9AM-5PM
SA 8AM-3PM

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

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



Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU 9:30AM-6PM
 TH-F 9:30AM-6PM

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

Min/Max 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

SANDOC, EMILY, OD

Provider Gender: Female

License Number: 13535

NPI: 1992969794


Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

 5638 MISSION CENTER RD STE 103

SAN DIEGO, CA 92108

 Phone: (619) 295-2900

Fax: (888) 210-5799

 After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max 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

SHULKIN, MITCHELL, OD

Provider Gender: Male

License Number: 8153

NPI: 1770531865


Provider English Spoken: Y

Cultural Competency: Y

NORTH COUNTY OPTOMETRY

 11835 CARMEL MTN RD STE 1313

SAN DIEGO, CA 92128

 Phone: (858) 674-1276

Fax: (858) 674-5863

 After Hours Phone: (858) 674-1276

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken: Tagalog


Min/Max 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-4PM

TU 7AM-1PM

W-TH 10AM-7PM

F 10AM-3PM

SA 9AM-2PM

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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y


Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

 5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108


 Phone: (619) 295-2900

Fax: (888) 210-5799

 After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

Min/Max 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

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

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






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J. Directorio de proveedores de la vista: servicios oculares y de la vista

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 9AM-5:30PM SA 9AM-3PM*

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
 *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*


TAM, MAY, OD

Provider Gender: Female
License Number: 11960
NPI: 1548255896
Provider English Spoken: Y
 *Spanish*
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
 1555 PALM AVE STE A2
SAN DIEGO, CA 92154
 *Phone: (619) 297-2020*
Fax: (888) 210-5799
 *After Hours Phone: (619) 297-2020*






Accepting New Patients: Yes
 *Site English Spoken: Y*
Min/Max 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*

TILLMAN, SYLVIA, OD

Provider Gender: Female
License Number: 9726
NPI: 1174730824
Provider English Spoken: Y
 *Spanish*
Cultural Competency: Y

JASMINE P NGUYEN OD INC

 4029 43RD ST STE 300
SAN DIEGO, CA 92105
 *Phone: (619) 284-3937*
Fax: (619) 284-3938
 *After Hours Phone: (619) 284-3937*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish, Vietnamese*
Min/Max 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*


TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 697-4600*
Fax: (619) 697-2410
 *After Hours Phone: (619) 697-4600*
Accepting New Patients: Yes

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista



 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


 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

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

TRAN, ALEXANDER, OD

Provider Gender: Male
 License Number: 14136
 NPI: 1902414790

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

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

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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):

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

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

📍 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

 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


Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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
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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

Site Hindi

Cultural Competency: Y

EYE CARE OPTOMETRY ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619) 466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Arabic, Spanish

Min/Max Age: 0\None

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


J. Directorio de proveedores de la vista: servicios oculares y de la vista

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 SA 9AM-5PM*

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y


EYE CARE OPTOMETRY

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J. Directorio de proveedores de la vista: servicios oculares y de la vista

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:
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender
restriction

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

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

NPI: 1356414551

Provider English Spoken: Y

🗳 Korean, Spanish







Cultural Competency: Y




BRUCE D GEORGE OD

📍 931 ANZA AVE STE B
VISTA, CA 92084





Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

J. Directorio de proveedores de la vista: servicios oculares y de la vista

 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

 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
 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

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

Tabla de población de enfoque (POF) de ECM

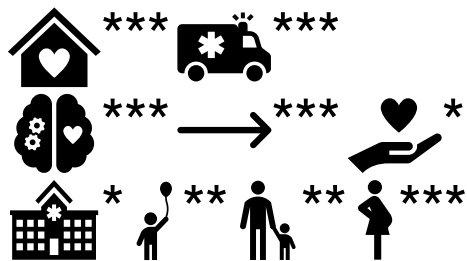
Población de enfoque de ECM			Adulto	Niños y jóvenes
	1	Personas sin hogar	✓	✓
	2	Personas en riesgo de utilización evitable de hospitales o salas de urgencias (<i>formalmente denominados "altos usuarios"</i>)	✓	✓
	3	Personas con necesidades de trastornos graves de salud mental o por consumo de sustancias	✓	✓
	4	Individuos en transición del encarcelamiento	✓	✓
	5	Adultos que viven en la comunidad y están en riesgo de institucionalización para cuidados a largo plazo (LTC)	✓	
	6	Residentes de centros de enfermería para adultos en transición a la comunidad	✓	
	7	Niños y jóvenes inscritos en California Children's Services (CCS) o CCS Whole Child Model (WCM) con necesidades adicionales más allá de la condición de CCS		✓
	8	Niños y jóvenes que reciben bienestar del menor		✓
	9	Población de enfoque con equidad de natalidad	✓	✓

K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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:

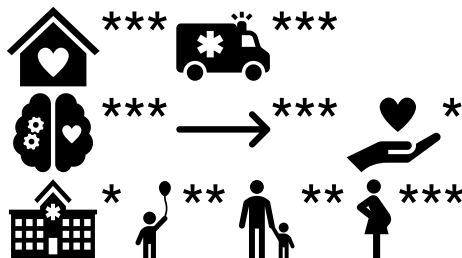


Community Supports Services:
N/A
Street Medicine Provider: N
Phone for Existing Patients:
(619) 510-4641
Mailing Address: 4060
FAIRMOUNT AVE;SAN
DIEGO;CA;92105

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

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

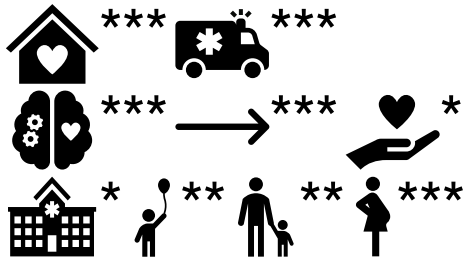
Comuníquese con Atención al Cliente de Blue Shield Promise al 1-800-605-2556 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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

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

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)


*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-800-605-2556 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.

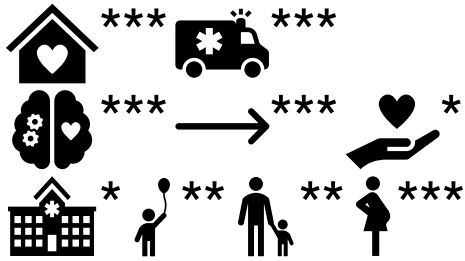
K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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

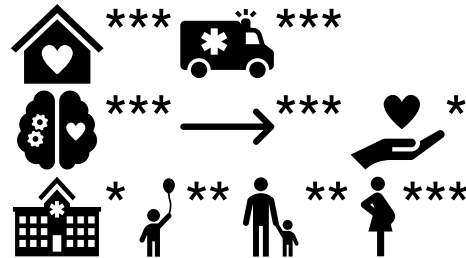
 *Phone: (619) 510-4641*

 *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

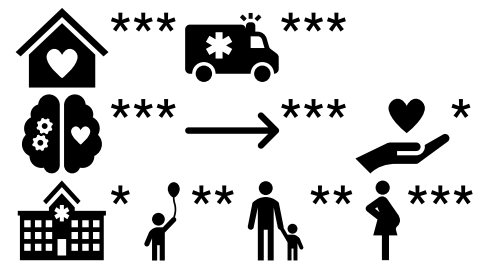
 *Phone: (619) 510-4641*

 *After Hours Phone: (619) 510-4641*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

ECM Population of Focus:



*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)





Community Supports Services: N/A

Street Medicine Provider: N
Phone for Existing Patients: (619) 510-4641

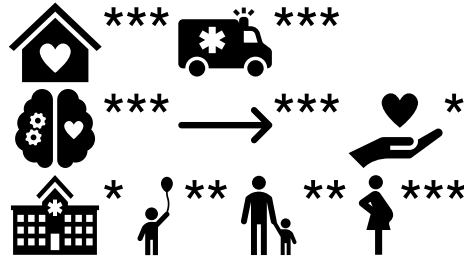
Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105

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

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

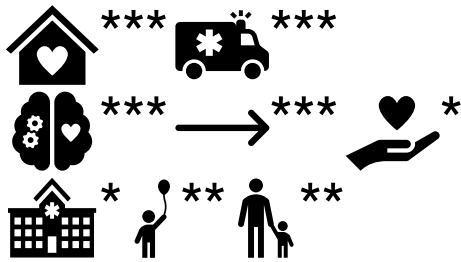
ECM Population of Focus:

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)



*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

SERENE HEALTH

4849 RONSON CT STE 207
SAN DIEGO, CA 92111

Phone: (844) 737-3638

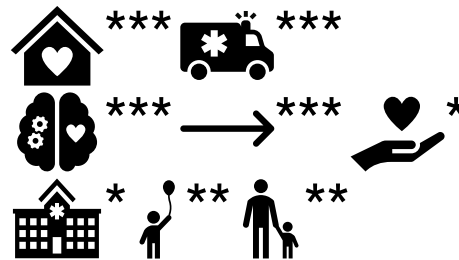
After Hours Phone: (844)
737-3638

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*

*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

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:

Housing Deposits, Housing

Tenancy and Sustaining

Services, Housing Transition

Navigation

Services, Recuperative Care

(Medical Respite), Short-Term

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

*Post-Hospitalization Housing
Street Medicine Provider: N
Phone for Existing Patients:
(619) 810-8668*





PEOPLE ASSISTING THE HOMELESS

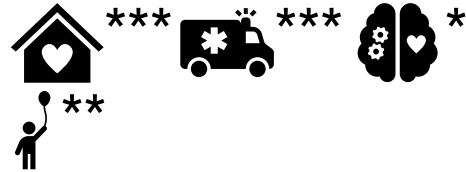
 1250 SIXTH AVE
SAN DIEGO, CA 92101
 Phone: (619) 810-8668
 After Hours Phone: (619) 810-8668
 Accessibility: CONTACT PROVIDER

 Website: N/A
Community Supports Services:
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:

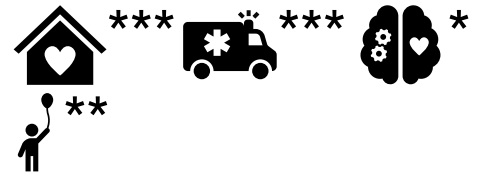


Community Supports Services:
N/A

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

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:

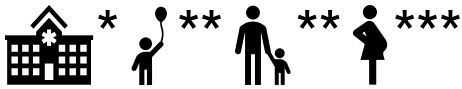


*Adultos **Niños ***Tanto adultos como niños

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)



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

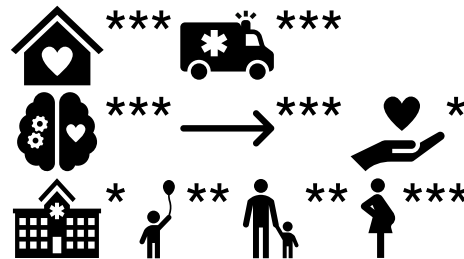
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

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

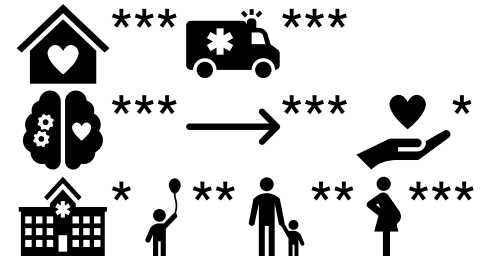
JI ECM Provider Billing- Direct
Contract with Correctional
Facilities;JI ECM Provider
Billing- FFS (PAVE Enrollment)
JI ECM Provider
Services-Pre-Release Services
and Participating in Warm
Handoffs

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

*Adultos **Niños ***Tanto adultos como niños




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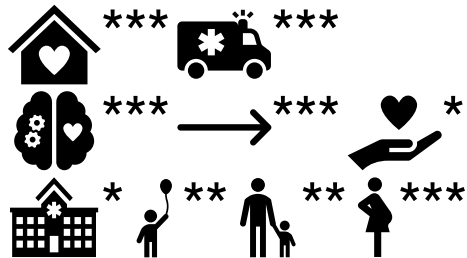
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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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

 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:

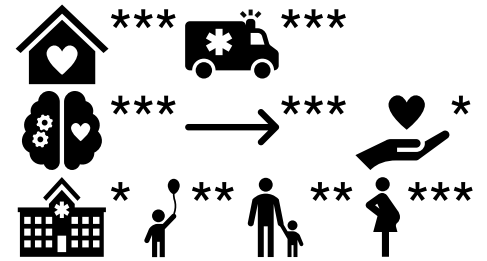


*Community Supports Services: N/A
Street Medicine Provider: N
Phone for Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105
Jl ECM Provider Billing- Direct Contract with Correctional Facilities;Jl ECM Provider Billing- FFS (PAVE Enrollment) Jl ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

LA MAESTRA COMMUNITY HEALTH CENTERS

 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
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

*Adultos **Niños ***Tanto adultos como niños

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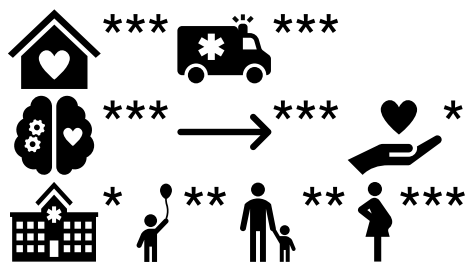
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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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

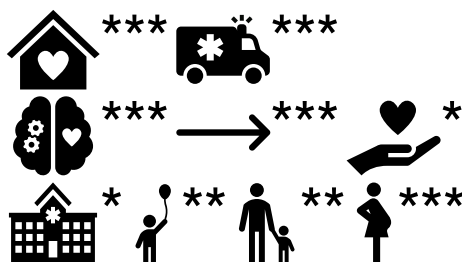
Jl ECM Provider Billing- Direct Contract with Correctional Facilities; Jl ECM Provider

Billing- FFS (PAVE Enrollment)
Jl ECM Provider
Services-Pre-Release Services and Participating in Warm Handoffs

LA MAESTRA COMMUNITY HEALTH CENTERS

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

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

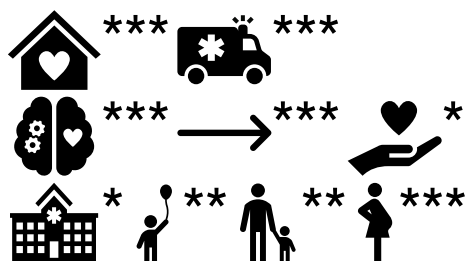
4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 510-4641
After Hours Phone: (619) 510-4641
Site Language(s) Spoken: Spanish
Hours: M-F 8AM-5PM
Accessibility: CONTACT PROVIDER
Website: N/A
ECM Population of Focus:

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)



Community Supports Services:
N/A

Street Medicine Provider: N

Phone for Existing Patients:
(619) 510-4641

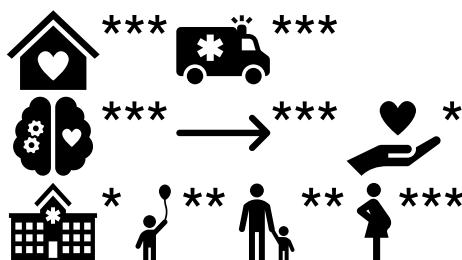
Mailing Address: 4060
FAIRMOUNT AVE; SAN
DIEGO; CA; 92105

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 Language(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

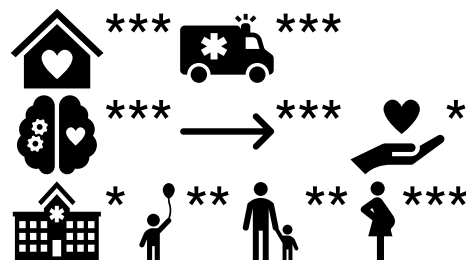
Jl ECM Provider Billing- Direct
Contract with Correctional

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

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

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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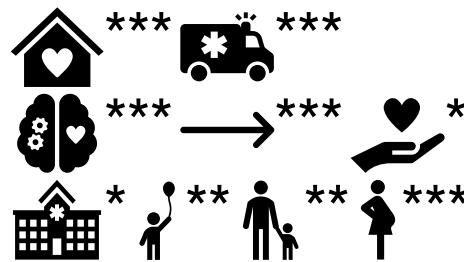
K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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

 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:





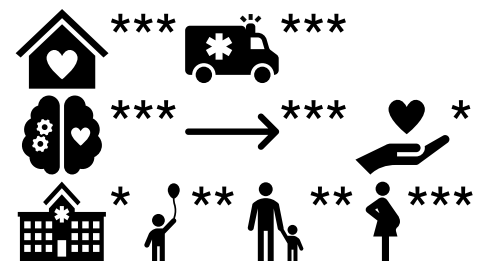
Community Supports Services: Asthma Remediation, Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services Street Medicine Provider: N
Phone for Existing Patients: (619) 510-4641
Mailing Address: 4060 FAIRMOUNT AVE; SAN DIEGO; CA; 92105
JI ECM Provider Billing- 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:

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

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

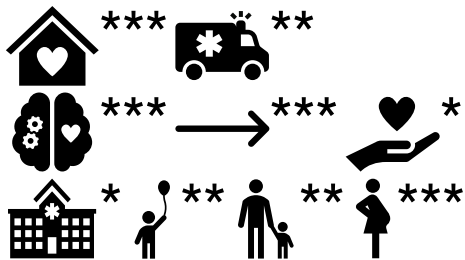
DIEGO;CA;92105

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

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:



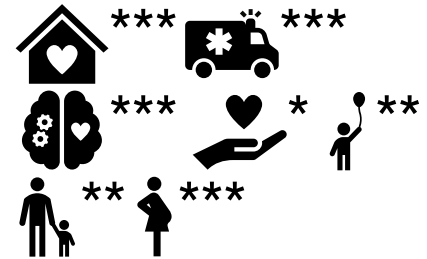
Community Supports Services: Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services
Street Medicine Provider: N
Phone for Existing Patients: (619) 876-4450
Mailing Address: 823 GATEWAY CENTER WAY;SAN DIEGO;CA;92102

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

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

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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)
 507-9333
 Accessibility: CONTACT
 PROVIDER

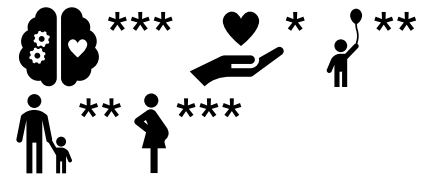
 Website: N/A
 ECM Population of Focus:


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:

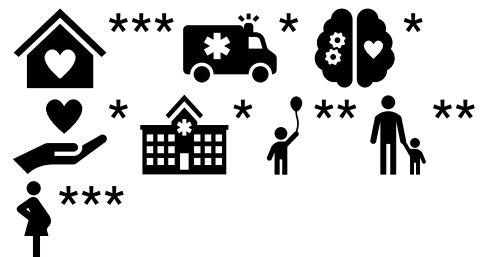




Community Supports Services:
 N/A
 Street Medicine Provider: N
 Phone for Existing Patients:
 (619) 507-9333

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:



*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

Community Supports Services: Food/Meals/Medically
N/A

Street Medicine Provider: N
Phone for Existing Patients:
(619) 429-3733



Food/Meals/Medically
Tailored Meals

Street Medicine Provider: N
Phone for Existing Patients:
(858) 637-3221

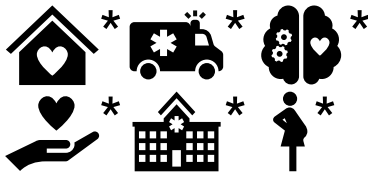
Food/Meals/Medically
Tailored Meals

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

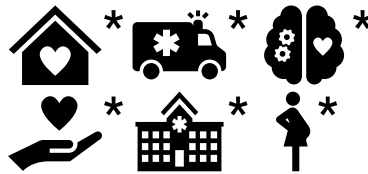
ECM Population of Focus:



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:



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

Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation
Services, Medically-Supportive

Community Supports Services:
Housing Deposits, Housing
Tenancy and Sustaining
Services, Housing Transition
Navigation
Services, Medically-Supportive

2-1-1 SAN DIEGO

 3860 CALLE FORTUNADA
SAN DIEGO, CA 92123
 *Phone:* (818) 370-8184
 *After Hours Phone:* (818)
370-8184
 *Accessibility:* CONTACT

*Adultos **Niños ***Tanto adultos como niños

† La gestión de atención ampliada (ECM) y los apoyos comunitarios requieren una autorización previa y están limitados a los miembros que cumplen con criterios de elegibilidad específicos. La medicina callejera, o salud callejera, es la práctica de brindar atención médica a las personas sin hogar.






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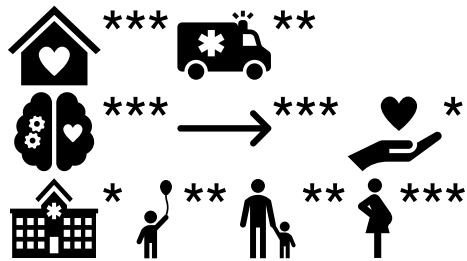
K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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

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
 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

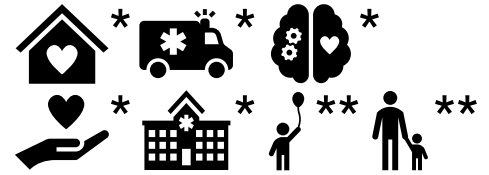
SAN MARCOS

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
 hc.com](http://www.americareadhc.com)
 Cultural Competency: N

*Adultos **Niños ***Tanto adultos como niños

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K. Otros proveedores de servicios (apoyos comunitarios, administración de la atención ampliada)

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:



*Adultos **Niños ***Tanto adultos como niños

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L. Centros de atención de urgencia de 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: 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/>

Accepting New Patients: No


 <https://www.afcurgentcare.com/san-diego/>


Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO

NPI: 1952995466

 1740 ROSECRANS ST
SAN DIEGO, CA 92106

 (619) 790-7800

 (619) 790-7800

 SU-SA 8AM-8PM

 *Accessibility:* CONTACT PROVIDER

 <https://www.afcurgentcare.com/san-diego/>


Accepting New Patients: No


SAN DIEGO


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


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


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/>

Comuníquese con Atención al Cliente de Blue Shield Promise al 1-855-699-5557 para obtener información actualizada, de lunes a viernes, de 8:00 a.m. a 6:00 p.m. TTY/TDD: 711. Visite en línea en blueshieldca.com/promise/medi-cal. La información en este directorio de proveedores está sujeta a cambios.


L. Centros de atención de urgencia de 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


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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L. Centros de atención de urgencia de Blue Shield Promise

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN**

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN**

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN**

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN**

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN**

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN**

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDN**

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-8133

 (858) 966-8133

 *Accessibility:* CONTACT PROVIDER

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L. Centros de atención de urgencia de Blue Shield Promise



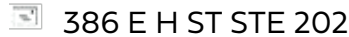
N/A

Accepting New Patients: No

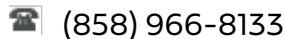
RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

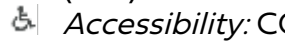
NPI: 1669617197



386 E H ST STE 202
CHULA VISTA, CA 91910



(858) 966-8133



(858) 966-8133



Accessibility: CONTACT PROVIDER



N/A

Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED FNDTN

NPI: 1669617197



386 E H ST STE 202
CHULA VISTA, CA 91910



(858) 966-8133



(858) 966-8133



Accessibility: CONTACT PROVIDER



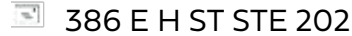
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Accepting New Patients: No

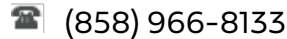
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SPECIALISTS SAN DIEGO MED FNDTN

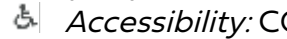
NPI: 1669617197



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Accessibility: CONTACT PROVIDER



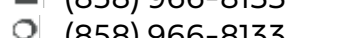
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RADY CHILDRENS

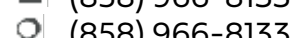
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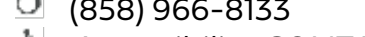
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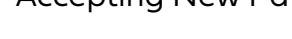
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L. Centros de atención de urgencia de Blue Shield Promise

 *Accessibility:* CONTACT PROVIDER


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Accepting New Patients: No

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ESCONDIDO


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NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8AM-5PM


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Accepting New Patients: No


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LA MESA


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED FNDDTN

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

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 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


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L. Centros de atención de urgencia de Blue Shield Promise


 *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

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OCEANSIDE


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NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

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 N/A


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FN D TN**

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


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SAN DIEGO


RADY CHILDRENS

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NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

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 4305 UNIVERSITY AVE STE
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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


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SAN DIEGO


RCH MID CITY URGENT CARE

NPI: 1710065933

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SAN DIEGO, CA 92105

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ESCONDIDO

RCH NORTH COUNTY URGENT CARE

NPI: 1710065933

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 (760) 739-1543

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 *Accessibility:* CONTACT
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Accepting New Patients: No


OCEANSIDE


RCH OCEANSIDE URGENT CARE

NPI: 1710065933

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1000

 (760) 547-1000

 SU 1PM-10PM
M-F 4PM-10PM
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Accepting New Patients: No


SAN DIEGO


SOUTHBAY URGENT CARE INC


NPI: 1558746750


 1628 PALM AVE
SAN DIEGO, CA 92154

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M. Lista de médicos de atención primaria

2	AL-NOURI, OMAR.933, 1356, 1363	AMERICARE ADULT DAY HEALTH
2-1-1 SAN DIEGO..... 1678, 1679	AL-TAMEEMI, AHMED. 368	CARE CENTER. 1458, 1680
A	ALAGIRI, MADHU..... 1283	AMIRNOVIN, RAMBOD..... 1247
ABDALLAH, ALI..... 491	ALANI, ANAS..... 1059	AMOS, MARIA..... 1064
ABDULRAHIM, AHMED. 310	ALANIZ, MATEO..... 326	AMREEN HOME..... 1453
ABELL, GEOFFREY..... 557	ALASSIL, SALLY..... 522	ANAND, GOBIND..... 833, 1130, 1131
ABERCROMBIE, SHERI..... 1310, 1501	ALBARRAN-SLOVIN, MELODY.788,	ANDAYA, MIKHAEL..... 432
ABOUL-HOSN, RYAN..... 1593	1064	ANDER, AZIZ..... 1391
ABRAMSON, RACHEL..... 557	ALBORZIAN, SHERVIN..... 380	ANDERSON, ELAINE.678, 718, 754,
ACCESS TO INDEPENDENCE..... 1448	ALBRIGHT, KELSEY..... 900, 1296	949, 1137
ACEVEDO, SUSANA..... 642	ALDANA, NANCY..... 403	ANDREE, GREGOR..... 558, 1284
ACKROYD, ARCHIE..... 1626	ALDOUS, JEANNETTE.522, 631, 1142,	ANDREWS, BRAD..... 1017
ACOSTA, AZUCENA. .1489, 1490, 1538	1401	ANDREWS, JOHN..... 522
ADAMI, REBECCA..... 951, 1160, 1161	ALEXANDER, BRENTON..... 793, 1051	ANDRY, JAMES..... 711, 713, 939, 1367
ADAMS, LAURA..... 932, 1355	ALFONSO, ALVIN..... 814, 1099	ANWAR, YASMIN..... 991, 1406
ADAMS, MONA..... 1562, 1569, 1626	ALGHAMDI, ASMA. 364, 432, 617, 717	ANZA HOUSE..... 1453
ADJAN, ROULA..... 381, 557	ALGHURAIBI, OHOUD..... 777	AOTO, KIM.664, 720, 741, 764, 765, 874,
ADLOUNI, LOUBABA..... 558	ALGRA, JEFFREY..... 990, 1294	956, 1003, 1213, 1214, 1545, 1556, 1563,
AFC URGENT CARE OF BONITA. 1681	ALIMONOS, LYSISTRATI.338, 374,	1593, 1613, 1627
AFC URGENT CARE OF SAN DIEGO.	423, 533, 534, 652	APPLEGET, JOSEPH..... 815, 1099
..... 1681, 1682	ALKATIB, RHONDA..... 1237	AQUINO, FELINO..... 429, 464
AFC URGENT CARE OF SANTEE. 1682	ALLEN, ELIZABETH..... 895, 1233	ARAIZA, ERNESTINA..... 721, 1463
AGHILI, ROXANA.695, 768, 1031, 1246,	ALLEN, KATHERINE..... 421	ARBOR HILLS NURSING CENTER.
1247	ALLERS, JENNA..... 901	..... 1445
AGING & INDEPENDENCE	ALLSUP, VICTORIA..... 1284	ARCE GOMEZ, LAURA..... 327
SERVICES..... 1459	ALOTAIBI, MONA..... 850	ARCHAMBAULT, CHRISTIAN..... 558
AGNIHOTRI, PARAG..... 1157	ALSHEIKH, HUDA..... 416	ARCHIBALD, JOHN..... 1579, 1627
AGUERO, AMETHYST..... 402	ALSTEEN, STEPHANIE..... 1064	ARELLANO, JACQUELINE.729, 801,
AGUERO, PETER..... 1341, 1342	ALTAMIRANO, LEON..... 1395, 1532	1061
AGUEY, OMAR..... 658	ALVARADO HOSPITAL LLC..... 1434	ARIELLA, LYNDA..... 1396, 1532
AGUILA, YESENIA..... 1064	ALVARADO, EDMUND..... 576	ARLATA, TAMANTHA..... 650
AGUILAR, EDITA..... 403	ALVAREZ, LISA..... 464	ARLINGHAUS, RENE..... 1467
AGYEMANG, ALBERTA..... 802	ALVAREZ-ESTRADA, MIGUEL.492,	ARMANI, AVA. 749, 933, 1356, 1430
AHMAD, AAKIF..... 490	618, 1123, 1398	ARMEEN, GARY..... 901, 1297
AINSWORTH, DELISSA..... 900, 1296	ALYAS, ALISIA..... 384, 385	ARMENTA, JORGE..... 385, 444, 577
AISAGBONHI, OMONIGHO..... 895	AMADOR, LINDSAY..... 814, 1099	ARNOLD, REBECCA..... 1463
AKASHI, MARC..... 345	AMANAT, SOROOSH..... 326	AROCHO-SALGADO, MIRELIS.709,
AKONG, KATHRYN..... 1279	AMANI, RAMIN..... 660	782, 1348, 1349
AKRAMI, KEVAN..... 726	AMANN, CHRISTOPHER...727, 819, 1111	ARONLEE, TRACY..... 1501, 1502
AL ANI, NAJWAN..... 363	AMARAL, MARGARET..... 869	ARRIETA, IRIS..... 1422
AL KHIAMI, BELAL..... 851, 973	AMAYA SPRINGS HEALTH CARE	ARRIETA, NOEMI..... 395, 618, 1398
AL NAHLAWI, BASMA..... 1397, 1398	CENTER..... 1452	ARROYO VISTA NURSING CTR. ...1449
AL-DAHHAN, ZAID..... 759	AMAYA, RICARDO..... 355	ARTS, SERENA..... 465
AL-MSHHDANI, AYSER..... 533	AMBO, STANLEY..... 661	ARUTYUNOV, BORIS..... 1145
	AMBROSE, CHRISTOPHER.. 667, 1429	ARVIZU, PALOMA..... 421

M. Lista de médicos de atención primaria

ASIMAKOPOULOS, FOTIOS.....	836	BALLARD, BROOKE.....	964, 1367	BELLA VISTA HEALTH CENTER..	1446
ASIS, STEPHANIE.....	1556, 1569, 1593	BALLAS, JERASIMOS.....	733, 853	BELLINGHAUSEN, AMY...821, 1112, 1113	
ASLIAN, AZITA.....	441, 1001	BALTRUS, JUSTINE.....	1534	BELLO, OSAGIE.....	520
ASSADIAN, MEHRAK.....	486	BAMFORD, LAURA.....	1142	BELLOMO, THOMAS.768, 948, 1031,	1248
ASSELIN, LYNETTE.....	661	BANGS, SASHA.....	444	BELTRON, KIMBERLY.....	465, 1065
ATIENZA, PAMELA.....	345	BANKS, SARAH.....	1311, 1502	BELVERUD, SHAWN.....	1364
ATIGA, SCHUBERT.....	690	BANSAL, PREETI.740, 762, 977, 1024,		BEN-HAIM, SHARONA.668, 936, 1365	
ATMAR, AKMAL.....	1003	1205, 1563, 1569, 1627		BENARD, ROBERT.....	1065
AUSTIN PAGE, LUKAS.....	1247	BARBA, ARNEL.....	1100	BENCH, SHAWN.....	1357
AUSTIN, ANDREA.....	820, 1111	BARBA, DAVID.....	729, 936, 1364	BERGEN, SOPHEA.....	1297
AVALLONE, THOMAS.....	1594	BARBADILLO, FERDINAND..	346, 642	BERGERON, PATRICK.....	925, 1342
AVIARA HEALTHCARE CENTER..	1442	BARBADILLO, TERESITA.....	441	BERGGREN, ERICA.....	637
AVILA, MICHAEL.....	395	BARLEBEN, ANDREW..	934, 935, 1363	BERGMARK, JAMIE.....	1570, 1628
AVOCADO POST ACUTE.....	1440	BARMAN, PRANAB.....	840, 1140	BERMAN, ZACHARY.....	919, 1325
AWDISHO, ALAN.....	369, 718	BARNES, RYAN.....	1356	BERNADETT, ALEX.....	1124
AWDYKOVYCH, MARTA.....	559	BARRON, KAVITA.....	1503	BERNARDO, RACHELLE.....	609, 610
AYELE, MAHOGANY.....	1408	BARRY, JEFFREY.....	820, 1112	BERNETICH, MEGHAN.....	1408, 1409
AYON MARTINEZ, CARLOS.....	657	BARTZ, BRYAN.....	1342	BERUMEN, JENNIFER.....	1357
AYSON, NICOLE.....	559	BASIN, NATALIE.....	1037	BESTERFELDT, LYDIA.....	465
AZIMI, AYSUN.....	559	BASS, GURGIANA.....	1311, 1503	BETTY, MARYANN.696, 769, 957,	1032, 1248
B					
BACHARACH, REBECCA.....	492, 651	BATISTA, OSVALDO.....	577	BEVINS, ELIZABETH.....	859, 1181
BAE, JINYI.....	1007	BATRA, REEMA.....	949	BHATIA, SHAGUN.740, 762, 978, 1024,	1206, 1563, 1570, 1628
BAEK, KILHYO.....	445	BAUM, PETER.....	315, 619, 665	BHATTACHARJEE, RAKESH.....	1279
BAEZ, BEATRICE.....	432	BAUMAN, LAURA.....	1131	BIALOSTOZKY, MARIO.....	1248
BAGBY, JESSICA.....	724, 820, 1111	BAUMANN, DANIELA.1545, 1556,		BICKLER, STEPHEN.....	1373
BAGHOUMIAN, MARINEH.....	1594	1563, 1570, 1582, 1594, 1595, 1613, 1628		BIFFL, SUSAN.....	990, 1294
BAGINGITO, AUSTIN.....	492	BAUTISTA, JENNIFER.....	748, 1429	BILLINGTON, KATHERINE.....	1100
BAHRAMZI, MARIA.....	492, 493	BAUTISTA, LUIS.....	311, 493	BILOTTA, NATALIE.....	1065
BAI-TONG, SHIYU.....	736, 855, 1168	BAXTER, SALLY.....	870, 1205	BINDER, NICHOLAS.1545, 1556, 1570,	1595, 1614, 1629
BAILEY, JACOB.....	918, 1320, 1321	BAYAT, HAMED.....	755, 756, 1044	BINDER, PRATIBHA.738, 861, 977,	1024, 1423
BAILIS, JESSICA.....	912, 1478	BAYLIS, CHRISTOPHER.....	815, 1100	BINETTE, DONYA.....	592, 1007
BAILONY, AHMAD.....	441	BAYLON, ALDO.....	701, 1460	BIRCH PATRICK CONV CTR.....	1439
BAILONY, MOHAMMED.....	441	BEAUCHAMP WALTERS, JULIA..	1284	BISHOP, MELISSA.....	493
BAIN, NATALIE.....	493	BEAUMONT, THOMAS.....	936	BLACK, NICHOLAS.....	821
BAISLEY, SHAWN.....	313, 407	BEAZER, ALEX.....	870, 1205	BLAIS, MICAH.....	939, 1367
BAJWA, MANDEEP.....	559	BECERRA SONGOLO, TOSHA.794,		BLAKE, GARY.....	535, 1191
BAKER, TANYA.....	1065	1051		BLAKESPEAR, JEREMY.....	610
BALBOA NURSING AND REHAB CTR.		BECERRA, GABRIEL.....	1467	BLAND, JACELIS.....	1042, 1385
.....	1449	BEDROSIAN, DIANE.....	661	BLASKIEWICZ, DONALD.....	668, 937
BALDONADO, ANALICIA.....	354	BEGOVIC, ADNAN.....	727, 971, 1155		
BALDWIN, ANDREA.....	1007	BEITTER, KEERSTIN.....	698, 774, 1297		
BALDWIN, DONNA.....	462	BELANGER, TANYA.....	596, 597, 1387		
BALIKIAN, PHILIP.....	1048, 1049	BELEN, NEZER.....	357, 465		
BALL, SHELDON.....	1145, 1146	BELINSKY, MARIA.....	1467, 1468		
		BELL, TRACY.....	1123, 1124		

M. Lista de médicos de atención primaria

BLISS, MORGAN.742, 765, 979, 1030, 1217	BRIONES COLMAN, FELICIA..... 523	CALDERON MORALES, ASTRID.709, 782, 1349
BLOCKER, NIRIT..... 588	BRODERICK, RYAN.....1357, 1358	CALDERON, JORGE..... 631
BOCK, MATTHEW..... 1239	BRODSKY, MARK..... 494	CALHOUN, CHANELLE..... 453, 454
BODIFORD, SAMANTHA.....494	BROMAN, GRETCHEN..... 445, 446	CALIFANO, JOSEPH.....877, 1218
BOECK, CARL..... 1629	BROOME, HELEN..... 896, 1234	CALLAGHAN, KATHRYN.....1504
BOEDER, SCHAFER..... 830, 1120	BROUDY, ABRAHAM.....346	CALLAWAY, MALLORY.....1340
BOEING, KRISTINA..... 1100	BROWN, DARCIÉ.....1503	CAMACHO, BENJAMIN..... 998, 999
BOHR, CHRISTINA..... 523	BROWNING, ELIZABETH.....789	CAMARGO-LOWTHERS, ANGELICA..... 1066, 1067
BOIKO, SUSAN..... 768, 1246	BRUBAKER, ALEAH..... 1358	CAMERON, MELISSA..... 773, 1285
BOND, KIMBERLEE..... 1203, 1204	BRUECKNER, TAMMIE..... 901, 1298	CAMP, ANDREW..... 1206
BONDRE, IOANA.....862	BRUHN, JOSHUA..... 364	CAMPA, PATRICIA.....722
BONSU, BEMA..... 442, 560	BRUMUND, KEVIN. 876, 877, 1217, 1218	CAMPBELL, BRIANNA. 432, 495, 1124
BOOTH, CHRISTOPHER..... 913, 1478	BRUNETTO, HEIDI.....967, 1488	CAMPBELL, SARA..... 1249
BORDIN-WOSK, TALYA.....843, 1146	BRUNO, KELLY..... 794, 1052	CAMPBELL, TANNER.....1368
BOROK, ZEA..... 850, 1156	BRYANT, DUANE.....691	CAMPOS, MELISSA..... 327, 619
BORQUEZ, ALEJANDRO..... 981, 1240	BRYL, AMY..... 1249	CANLAS, AVELINO..... 433
BORRAJERO, OBEL..... 788	BUCKNER, JOSEPH..... 646	CANO, SARAH..... 1052
BORREGO MEDICAL CLINIC..... 22, 23	BUECHNER, CHARLENE.339, 374, 424, 535, 536, 652	CANTU, ALICIA.....1285
BORREGO MEDICAL CLINIC, 314	BUENROSTRO, CHRISTINA.803, 1066	CANTU-REYNA, GUILLERMO.440, 533
BORRERO, MARCOS..... 521, 1135	BUI, ANH..... 1066	CAO, STEPHANIE..... 1629, 1630
BORSAN, COSMIN.....619	BUI, CHRISTOPHER.....1368	CAPARSO, AMANDA..... 459
BORTNER, ADAM.....494	BUI, JACK..... 896, 1234	CAPETANAKIS, ELENI..... 346
BOSTON, LAURA..... 324, 485	BUI, JONATHAN..... 736, 1181	CAPOZZI, JENNIFER..... 803, 1067
BOULDER CREEK POST ACUTE. 1448	BUI, MAI..... 1106, 1107	CARAPIA, FABIOLA..... 671
BOUTELLE, AMY..... 803	BUKATA, SUSAN..... 939, 1368	CARDINELL, ANNA..... 730, 1409
BOUTELLE, DAVID..... 668, 1406	BULLOCH, EDGAR..... 375, 415	CARDONES, ARTHUR..... 651
BOUTELLE, KERRI..... 913, 1478, 1479	BULLUM, ANTHONY.....787, 969	CARDOZA, CLAUDIA..... 1476
BOWERS, JESSIE..... 560	BULOW, KWI.....1401	CARE MERIDIAN LA MESA..... 1445
BOYD, LISA..... 901, 1297	BUNOSKY, ABIGAIL..... 926, 1343	CARLO HOUSE..... 1452
BOYS, JOSHUA..... 943	BURGAMY, ELIZABETH..... 319	CARLSON, KATHLEEN.....1008
BRADY, KATELYN..... 803	BURNS, DELLA..... 466	CARLTON PENN, CORNELIA.778, 1468
BRADY, PATRICIA.....494	BURROWS, TERENCE.....815, 1101	CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR..... 1449
BRANCH, CODY..... 919, 1325, 1326	BURROWS, WILLIAM..... 489	CARMONA, RUBEN..... 702, 962, 1323
BRANNEN, MANDY..... 715	BURTON, LUCAS..... 494	CARNEY, AMY.....394
BRAR, SIMERJEET..... 1479, 1503	BUSH, KELLY.....1274	CARPENTER, ROBERT.....369, 631
BRAVERMAN, IRA..... 439	BUTLER, KIM.....1557	CARR, MIANDA..... 637
BRAYTENBAH, MELANIE..... 670, 671		CARRA, BARBARA..... 1384
BREEDLOVE, AMANDA.....1503	C	CARRERA, JORGE..... 402
BRIED, JAMES.....1049	CABADING, DOREEN..... 357	CARRIEDO CENICEROS, MARIA.433, 495, 619
BRIGGS, BENJAMIN..... 1274	CABALLERO, JAMES..... 486	
BRIGHTON PLACE SAN DIEGO...1449	CABARLO, JEHRIB..... 560, 642	
BRIGHTON PLACE SPRING VALLEY..... 1452	CABRERA, MICHELLE..... 1392	
BRION, SONJA..... 391	CAGE, DORI NEILL..... 1364	
	CALAME, ANTOANELLA..... 1109	
	CALANDRA, JOAN..... 968	

M. Lista de médicos de atención primaria

CARRILLO, MARITZA..... 325, 490, 676	CERVANTES, SANDRA.339, 375, 424, 538, 539, 653	CHENG, KAREN. 919, 1327
CARRION GELABERT, ANA. 672	CEVALLOS, JAMES..... 433, 620	CHENG, YU TSUN. 993, 1369
CARROLL, JEANNE. 1169	CHA, DANIEL 1549	CHERRY, REENA. 902
CARSON, COREY..... 495	CHAIN, PEI CHI. 692, 1630	CHESHER, NICHOLAS.914, 1312, 1479, 1504
CARSON, LATISA. 637	CHAIT LLAMAS, LWBBA..... 643	CHEW, WESLEY..... 1596
CARSON, STEPHEN..... 560	CHAKRABARTI, PRIYA.339, 375, 424, 539, 540, 653	CHEWNING, RUSH..... 1327
CARSWELL, AIMEE. 919, 1326	CHALMERS, VIRGINIA..... 1490	CHIARAPPA, FRANK..... 940, 1369
CARTER, CAITLIN. 1278	CHAMBERS, KATRINA..... 730	CHIEN, PEI. 926
CARTER, KHALIL.339, 375, 424, 536, 537, 538, 652	CHAN, ANDY..... 523	CHILAKA, SAMUEL. 1008, 1409
CARTER, NATASHA..... 490	CHAN, KWOK FUNG. 1550, 1557	CHILDERS, DIANA 840, 841, 1140
CARVALHO, DANIELA..... 979, 1219	CHAN, TIFFANY..... 577	CHIRIBOGA, MEGAN ELISE..... 1009
CASA PACIFICA ADHCC..... 1458	CHANG, AMY..... 490	CHISHOLM, KAREN. 1551
CASEY, SHANNON..... 722, 1464	CHANG, JOHANNA..... 745, 1283	CHISWICK, GARY.321, 393, 458, 463, 611
CASILLAS BERUMEN, SERGIO.710, 783, 1359	CHANG, TOM..... 1564, 1571, 1595	CHITKARA, PUJA. 708
CASTANER, ZALYA 396, 657	CHANTALA, ELIZABETH..... 1067	CHIU, STEPHAN.870, 955, 1564, 1583, 1596
CASTELLANO, TIFFANY..... 821, 1113	CHAPIN, DENISE. 321	CHOATE, BERNADETTE..... 1068
CASTELLANOS, JOEL 799, 1057	CHARP, KENNETH. 386	CHOI, JI. 1009
CASTELLANOS, LUIS..... 1059	CHASE AVENUE FAMILY HEALTH CTRS INC..... 55, 56	CHOI, JIHOON. 940, 1369
CASTELNOVI, CLAUDIA. 561	CHASE AVENUE FAMILY HEALTH CTRS INC, 367	CHOI, NATHALIE. 817, 1103
CASTILLEJOS, DAVID..... 1550	CHASE, AVA LOU..... 466	CHONG, AMY..... 1285
CASTILLEJOS, MARIA. 1550	CHASE, ALEXANDRA..... 774, 1046	CHOO, SUN. 1032, 1249, 1274
CASTILLO, PATRICIA. 577, 1298	CHATFIELD, ALEXANDRA..... 1240	CHOU, BILL..... 496
CASTILLO, STEPHANIE..... 620	CHAU, PETER. 614	CHOW, BYRON. 404
CASTILLO, TIFFANY..... 1468, 1469	CHAUSSE CASTRO, EKATERINA..... 588	CHOW, MAN HUNG. 632
CASTLE MANOR NURSING AND REHABILITATION CTR..... 1446	CHAVARRIA, JESSICA 1068	CHRISTENSEN, PATTI..... 1469
CASTLEBERRY, DANI..... 1460	CHAVEZ, ALEXANDRIA..... 1068	CHRISTIANSON, WARREN.1490, 1491, 1538, 1539
CASTRO, DAVID. 966, 1107	CHEATHAM, BRITTANY. 1068	CHRISTIE, PATRICIA..... 787
CASTRO, JORGE..... 661	CHELVAKUMAR, GAYATHRI..... 1050	CHRISTY, TYLER..... 1009, 1410
CAUCHI, CAROLINE GUERRERO.1595	CHEN, ALICE..... 821, 822, 832, 1114, 1125	CHU, CHRISTOPHER.744, 773, 988, 1036, 1272
CEBALLOS, JACQUELINE CAMILLE. 1504	CHEN, ANDREW..... 755, 1044	CHUDACEK, JANET. 715
CELAYA, PATRICIA..... 701, 1461	CHEN, EILEEN. 561	CHULA VISTA FAMILY HLTH CTR.35, 36, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54
CELESTIN-RAMSEY, AKANKE. 466	CHEN, JENNIFER..... 561	CHULA VISTA FAMILY HLTH CTR, 335
CELESTINO, MISHEL..... 1394	CHEN, KENNETH. 972, 1431	CHULA VISTA PEDIATRICS. 34, 35
CELIZ, ADRIANA. 614	CHEN, LESLIE..... 1631	CHULA VISTA PEDIATRICS, 335
CENTRO MEDICO EL CAJON.57, 58, 64, 65	CHEN, MARGARET..... 402	CHUN, HYUN..... 496
CENTRO MEDICO EL CAJON, 367	CHEN, MING. 454	CHWA, JEFFREY..... 709
CENTRO MEDICO ESCONDIDO, . 400	CHEN, TONY..... 1381	CIDAMBI, EMILY. 1040, 1369, 1370
CERNELC KOHAN, MATEJKA.744, 1280	CHEN, TSUH YIN. 337, 632	CIOBANU, COSMINA. 1505
	CHEN, YU-WEI. 837, 1137	
	CHENG, BRANDON..... 703, 790, 1004	
	CHENG, EULALIA..... 1280	
	CHENG, GEORGE..... 843, 1146	

M. Lista de médicos de atención primaria

CISZEK, ALEXANDRA.....	1010	COTTONWOOD CANYON	DANESHMAND, SHAHRAM.....	638
CLARK, MELISSA.....	709, 782, 1350	HEALTHCARE CENTER.....	DANG, ERIC.....	1344
CLARK, SKYLAR.....	649	COUGHLIN, DAVID.....	DANG, KAYLEE.....	1344
CLARY, BRYAN.....	933	COULLAHAN, JESSICA.....	DANIELS, SARAH.....	455
CLAUDAT, KIMBERLY.....	914, 1479	COUNTRY HILLS HEALTH CARE	DAO, MARC.....	1422
CLAY, CORRIE.....	417, 960	CENTER.....	DAPPEN, AMANDA.....	497
CLEMENT, LUIS.....	1312, 1506	COUNTRY HILLS POST ACUTE...1440	DASCENZO, EMILY.....	387
CLEMENTINO, NANCY.....	391	COUNTRY MANOR LA MESA	DAVE, SHRAVAN.....	833, 1131
COBB, DAMON.....	1046	HEALTHCARE CENTER.....	DAVIDSON, JOHN.....	701, 1003
COBIAN, VANESSA.....	396	COX, VICTORIA.....	DAVIES, SUMMER.....	805, 1070
CODEN, DANIEL.....	1583	COYNE, CHRISTOPHER.....	DAVIS, CHRISTOPHER.....	766, 981, 1240
COFFEY, CHARLES.....	878, 1219, 1220	CRAFT, KEVIN.....	DAVIS, DEIRDRE.....	497
COHEN, CARA.....	404	CRANDAL, BRENT.....	DAVIS, JADE.....	1631, 1632
COHEN, MANSOUR.....	1191	CRAWFORD, ELWARD.....	DAVIS, JANET.....	1070
COLEMAN, BROOKE.....	1580, 1631	CRAWFORD-DAY, ANN.....	DAVIS, KELLE.....	665, 679, 713, 718, 1137
COLEMAN, LORI.....	703, 780, 962, 1323	CRAYCHEE, LEO.....	DAVIS, MORGAN.....	556
COLEMAN, PAGE.....	1069	CRIBE, TAYLOR.....	DAY, CHRISTOPHER.....	442
COLLINS, CATHLEEN.....	981, 1114, 1238	CRISOL, CAROLINE.....	DE CASTRO, SHARLENE.....	995
COLLINS, RESENIA.....	869	CROSS, JOHN.....	DE DIOS, SARAH.....	672, 805, 1070
COLLINS, WILLIAM.....	496	CRUZ RODRIGUEZ, JOSE.....	DE LA ROSA, JOSE.....	632
COMUNALE, RODERICK.....	1001	CRUZ, GUADALUPE.....	DE MIK, TRAVIS.....	340, 376, 425, 540,
CONCORS, ANDREW.....	588	CRUZ, MICHAEL.....	541, 653	
CONE, STEPHANIE.....	381, 382, 442, 561	CRUZ, VANESSA.....	DE SILVA, NIHAL.....	1403
CONNER, PAMELA.....	803, 804, 1069	1540	DEACON, CASSIE.....	1506
CONNOR, CAROLINE.....	804, 1069	CSAPOCZI, PETER.....	DEAN, MOENA.....	1546, 1557, 1564, 1583,
CONNOR, JEFFREY.....	1580	CUMMINGS, GEORGE.....	1596, 1597, 1614, 1632	
CONRAD, HEATHER.....	1250	CUNNINGHAM, ISIS.....	DECONDE, ADAM.....	879, 1220
CONRAD, RANDALL.....	1596	CUNNINGHAM, STEPHANIE.....	DEIS, CRISTINA.....	676
CONSTANTINO, STEPHANIE.....	651	CURET, ZULMA.....	DEISS, ROBERT.....	1142
CONTRERAS, LORETTA.....	577	CURLEY, EDWARD.....	DEL AGUILA, FABIOLA.....	1312, 1507
COOK, SHERYL.....	1038, 1492	CURRAN, BRIAN.....	DEL CAMPO CASANELLES, MIGUEL.....	1136
COOKISH, DAVID.....	902	CURTIS, MEGAN.....	DEL RE, AMANDA.....	410
COOPER, MICHAEL.....	1580, 1631	CUTCHON, SYDNEY.....	DEL RE, ANGELO.....	1250
CORDES, WILLIAM.....	562	CYMBALUK, ANNA.....	DEL ROSARIO, GELEN.....	1001, 1002
CORDOBA, MIGUEL.....	347	CZYPULL, MONICA.....	DEL ROSARIO, PAMELA.....	855, 1169
CORMAN, DANIEL.....	364, 497		DEL VECCHIO, MEGAN.....	1071
CORONADO, MYRNA.....	315, 620	D	DEL CORE, LAURA.....	738, 862, 1191, 1192
CORRY, ANDREA.....	362	DAGOSTINO, JACQUELINE.....	DEMASCO, MICHAEL.....	903
CORTEZ, AARON.....	1343	DAHMS, ERIC.....	DEMLINGER, GLENN.....	1662
CORTEZ, JAIME.....	1418	DAHMS, MADELYNN.....	DEMOOR, PATRICIA.....	903
CORTIZO, ROSA.....	1396, 1532	DAIRO, BRANDON.....	DENTICO-OLIN, MARC.....	1216, 1217
CORVINI, NICOLAS.....	775	669, 751, 1007,	DEPAOLO, AMANDA.....	1535
CORY, ALLISON.....	1411	1057, 1058	DERISSI, DANA.....	1298
COSINO, ANJELICA.....	1070	DALAL, PRITHA.....	DEUTSCH, KAREN.....	1071
COSTELLO, MARK.....	1343	DALHOUMI, SARAH.....		
		DALUGDUGAN, ESTHER.....		
		620, 1399		
		DAMANI, SAMIR.....		
		852, 999		

M. Lista de médicos de atención primaria

DEVERA, GEMMIE..... 696, 983, 1250	DORUELO, ASHLEY.340, 376, 425, 541, 542, 653	ELKIND, JAE..... 897
DHARKAR SURBER, SAPNA.. 429, 466	DORWART, ELIZABETH.....1251	ELLEDGE, LINDSAY..... 1481
DIA, ALI..... 1464, 1535	DOSHI, AMI..... 1286	ELO, KRISTIN..... 960
DIAMOND NEIGHBORHOODS	DOSHI, NEELIMA..... 405	ELSAYED, MOHAMMED..... 327, 328
FAMILY HLTH CTRS INC.137, 138, 139, 148, 149, 150, 213, 214, 215, 216, 217, 218, 219, 220, 221, 225, 226, 227	DOSS, KATIE.....1508	ELSTER, JENNIFER..... 1275
DIAMOND NEIGHBORHOODS	DOUGHERTY, CHRISTINE.1493, 1540, 1541	EMERUWA, UKACHI.....853, 1161
FAMILY HLTH CTRS INC, 513	DOUGHERTY, CLARA.699, 713, 746, 903, 960, 1298, 1299	EMPIE, KRISTEN..... 417
DIAZ, JAENAI..... 1507	DOVE, KATHERINE..... 1182	ENCINITAS NURSING AND REHAB CTR..... 1442
DIEP, KEVIN..... 524	DOWNTOWN FAMILY CTR AT CONNECTIONS..... 222	ERICKSON, LISA..... 1073
DIETERICH, FREDERICK..... 1423	DOWNTOWN FAMILY CTR AT CONNECTIONS, 514	ESCONDIDO CARE CENTER..... 1443
DILLMAN, ARIANA..... 673	DRAME, SALWA..... 578	ESCONDIDO FAMILY HEALTH CENTER, 400
DILLON, BENEDICT.....633	DRIEBE, AMY. 738, 739, 862, 863, 1193	ESKANDER, RAMEZ.733, 836, 1021, 1421
DILLON, MAYRA.....433, 997	DRISCOLL, KARRIE..... 806, 1072	ESTAVILLO, SAUL.....1509
DIMAIRA, FRANCESCA..... 805, 806	DRISCOLL, SUSAN.357, 995, 996, 1072	ESTRADA PATINO, ANGELA.778, 1469
DING, HILDA..... 1275	DSOUZA, NICOLE.....1508	ESTRADA, JOHANNA..... 621
DINH, MY.....638, 639, 1402	DUARTE, KRISTEN..... 914, 915, 1480	
DIOKNO, RHODA.....1312, 1507	DUARTE, ZULMA..... 1050	F
DIXIT, SHUBHAM..... 524	DUBE, BIANCA.....311	FABELLA, GABRIEL..... 525
DIXON, SARAH.....562	DUMMER, KIRSTEN..... 982, 1241	FABRIKANT, JORDAN.....1109
DJEKIC, KRISTINA.....844, 1146	DUNN-PIRIO, ANASTASIE.1182, 1183, 1508	FADARE, OLUWOLE..... 893, 1232
DO, ELAINE..... 467	DUONG, CHERYL.....1580, 1632	FAIRBANKS, TIMOTHY.750, 992, 1041, 1359
DO, HULBERT..... 1389, 1390, 1407	DUONG, KIM.....1571, 1632	FALLBROOK FAMILY HLTH CTR.99, 100
DO, STEPHANIE.....983, 1251	DUONG, MAI..... 369	FALLBROOK FAMILY HLTH CTR, . 410
DO, THOMAS..... 1240	DUSTIN, ADAM.....747	FALLBROOK SKILLED NURSING.1444
DOAN STEPHENS, CRYSTAL.521, 1286	DWYER, ERIN..... 730, 1073	FAMBRO, CYNTHIA..... 497
DOAN, ANGELA..... 1072	DY, DIANE..... 327	FAMILY HEALTH CENTERS OF SAN DIEGO.....1676, 1679
DOAN, CHINH..... 462, 592, 593	DYER, SHARON.1546, 1557, 1564, 1583, 1597, 1614, 1615, 1633	FAMILY HEALTH CTR IBARRA.205, 223, 224, 225
DOCKERY, LEE..... 1469		FAMILY HEALTH CTR IBARRA, 514
DOKICH, SRETENKA..... 412	E	FAMILY HEALTH CTR OF SD- ELM ST, 514
DOLLAND, STEVEN.....815, 1101	ECLARINO, GALELEO..... 1073	FAMILY HEALTH CTR OF SDELM ST. 206
DOLMETSCH, JEANETTE..... 578	EDMONDS, ERIC..... 783, 1370	FAMILY HEALTH CTR SAN DIEGO-OAK PARK. 204, 205, 206, 207
DOLNAK, DOUGLAS..... 1507	EICHEN, DAWN..... 915, 1480, 1481	FAMILY HEALTH CTR SAN DIEGO-OAK PARK, 514
DOMINGUEZ, DENNIS.....364	EICHENFIELD, DAWN..... 1246	FAMILY HEALTH CTR SD NATIONAL CITY..... 117, 118, 119
DOMINGUEZ, FERNANDO..... 524	EINSTEIN, ERIC..... 673	
DON, MICHELLE..... 896, 897	EISENSTEIN, SAMUEL.....1352, 1353	
DONALDSON, CHADWICK..... 666	EKANAYAKE, PREETHIKA..... 1120	
DONG, TAMMY..... 347	EKHOLM, JANNA.....1103	
DONNELL, MARTI.....448	EKPENYONG, ATIM.....1252	
DONOFRIO-ODMANN, JOY.....1251	EL CAJON ADHC.....1457	
DORINGO, ELAINIE..... 347		
DORN, TIA..... 422		
DORSEY, KYLE.....704		

M. Lista de médicos de atención primaria

FAMILY HEALTH CTR SD NATIONAL CITY,	437	FINN, DAPHNA.....	1481	FRUGONI, GINA.....	1194
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL.....	202, 204	FIREIZEN, YARON.....	1281	FRY, LIANE.....	1510
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,	515	FIRESTEIN, CATHERINE.....	841, 1141	FU, KATHERINE.....	1470
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,	515	FIRESTONE, MICHELLE.1312, 1313, 1509		FUJII, CINDY.....	643, 1403
FAMILY HLTH CTR SAN DIEGO-BEACH AREA.203, 207, 208, 209, 210, 211, 212, 213		FISHER, JAY.....	1252	FULKS, ZACKARY.....	716, 966
FAMILY HLTH CTR SAN DIEGO-BEACH AREA,	515	FISHER, JENNIFER.....	1341	FUNARI, CHRISTOPHER.....	775
FAMILY HLTH CTR SAN DIEGO-EL CAJON.. 58, 59, 60, 61, 62, 63, 64, 66, 76, 77, 78, 79, 80, 81, 82		FISHER, SLOANE.....	1074	FUNDINGSLAND, BRENT.	795, 1053
FAMILY HLTH CTR SAN DIEGO-EL CAJON,	367	FISHMAN, ELENA.....	562	G	
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC.....	33, 34	FITZGERALD, MICHAEL.....	1510	GAFFEY, ANN.....	935
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,	335	FLANIGAN, MARILYN.....	1488, 1510	GAHM, CLAIRE.....	1252
FAMILY HLTH CTR SAN DIEGOCITY COLLEGE.....	236, 237, 238	FLEMING, DAVID.....	428	GAINOR, GRETCHEN.....	413
FAMILY HLTH CTR SD HILLCREST. 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251		FLEMING, JOHN.....	1612, 1659	GALASSO, MADISON.....	674
FAMILY HLTH CTR SD HILLCREST,	515	FLEMING, SARAH.....	684, 1169	GALLARES, DANIEL.....	423
FARASAT, SADAF.....	525	FLEMING, TARA.....	382	GALLO, LINDA.....	702, 1461
FARRAR, COURTNEY.....	1039, 1344	FLETCHER, EMILY.....	347	GALUST, HENRIK.....	822
FARSHLER, ANTHONY.....	787	FLINN, SCOTT.....	1043	GANDHI, ANAND.....	491
FATLAND, SARAH.....	448, 449	FLINT, JAMES.....	940, 1370, 1371	GANDHI, SHEETAL.....	413
FAZELI, SOUDABEH.....	919, 1328	FLORES, ERNEST.....	348	GANESAN, ANUSHA.....	1275
FEJLEH, ASHLEY.....	794, 1052	FLORES, JOE.....	498	GANGJI, SHAZMIN.....	775
FEJLEH, MOHAMMAD.....	833, 834	FLYNN, DANIELLE.....	1396, 1532	GANTA, SRUJAN.....	1379
FELD, KEREN.....	1074	FODDA, RAMI.....	593, 1385	GARA, NAVEEN.....	754
FERNANDEZ LEYVA, JUAN.....	322	FOLCH TORRES-AGUIAR, BEATRIZ.	340, 425, 542, 543, 654	GARCIA, CALVIN.....	816, 1101
FERRAILOLO, NATALIE.....	396, 420	FONTANA, LOUIS.....	1535	GARCIA, CARLOS.....	348
FERRARA, SAMANTHA.....	961	FORCIER, NANCY.....	920, 1328, 1329	GARCIA, DEANA.....	578
FERRITER, STACY.....	816, 1101	FORSMAN, SHANA.....	393	GARCIA, JENNI.....	1160, 1511
FIELDING, JOSEPH.....	589	FORTUNE, ERIN.....	562, 563	GARCIA, JOHNNY.....	357, 467
FIGUEROA RODRIGUEZ, BRENDA.	382	FORZANI, CHRISTINA.....	1313, 1510	GARCIA, KARLA.....	328
FINCH, CHRISTINA.....	1280, 1348	FOWLER, KATHRYN.....	920, 1329	GARCIA, RAFAEL.....	348, 443
		FOX, KENNETH.....	1379	GARCIA, REGINA.....	1386
		FRAGOSO, DOMINIQUE.....	1464	GARCIA, RICHARD.....	1511
		FRANCIS, LARRY.....	965	GARCIA, ROSEMARIE.....	1466
		FRANK, GUIDO.....	1510	GARCIA, TEDAYSHIA.....	615
		FREDERICK, ALIYA.....	1183	GARCIA-SANDOVAL, DAMARIS. 1400	
		FREEMAN, WANDA.....	594, 712, 1385	GARFF, KEVIN.....	1657
		FRENCH, TONIANNE.....	674	GARIBYAN, VARTAN.....	464
		FRENETTE, CATHERINE.....	520	GARTH, MELISSA.....	806, 1074
		FRESNO, BLANCA.....	348, 442	GEE, JENNIFER.. 965, 1027, 1424, 1425	
		FRIEDMAN, JAIME.....	563	GELBERG, ANNA.....	844, 1147
		FRIEDMAN, RICK.....	880, 881, 1221	GENG, BOB.....	1238
		FRIENDSHIP MANOR NURSING AND REHABILITATION CTR.....	1447	GENOVESE, KELLY.....	1010
		FRIESEN, TZYYNONG.742, 765, 979, 1030, 1222		GEORGE, BRUCE.....	1581, 1663
				GEORGE, JENNIFER.....	356
				GEORGE, KENDALL.....	1581, 1662
				GEORGIEV, MARY JO.....	1396, 1532
				GEPSHTEIN, YANA.....	485

M. Lista de médicos de atención primaria

GERWER, JOHANNA.....	525	GOTTESFELD, STEVEN.....	904	GUIDO-ESTRADA, NATALIE.976, 1184,	1190
GHAFARI, DAUOD.....	314, 364	GOULD, HILARY.....	702, 1461	GUITTARD, JESSE.....	724, 822, 1115
GHAHREMANI, SIMIN.....	349, 643	GOVEA, ALAYN.....	852	GULLY, MICHELLE.....	996
GI, HUNG.....	646, 699	GOWDA, ASHWIN.....	728	GULOTTA, SAMANTHA.....	1512
GIAMONA, KRISTEN.....	1313, 1511	GOYAL, NIDHI.....	1272	GUNDOGDU, MELEK.....	1184
GIANFORTUNE, RACHEL.....	417, 418	GRACE HOUSE.....	1453	GUNTA, SUJANA.....	455, 456
GIANG, STEVEN.....	1633	GRAF, HALEY.....	1395	GUNTHER, HOPE.....	818, 1104
GIBONEY, JENNIFER.....	1252, 1287	GRAMINS, DANIEL.....	943, 994, 1041	GUPTA, ANUJ.....	1407
GILANI, SAPIDEH.....	881, 882, 1222	GRANITE HILLS HEALTHCARE AND		GUPTA, PRATIMA.....	863, 1194
GILBERT, CHRISTOPHER.....	756	WELLNESS CENTRE LLC.....	1440	GUPTA, VARSHA.....	564
GILES, GREGORY.....	1598	GRASSO, GINA.....	1661	GUTH, CARA.....	699, 1300
GILIBERTO, JOSEPH.486, 487, 997,		GRAVES, JENNIFER.....	1190	GUTIERREZ, ANGELICA.....	525
1107, 1108		GRAY, SARAH.....	563, 1287	GUTIERREZ, JUSTINE.....	387
GILROY, LAURA.....	1476	GREAR MANN, MELISSA.....	818, 1104	GUTIERREZ, TANIA.....	499
GIORGI, ASHLEY.....	1074	GREENE, JACQUELINE.882, 883,		GUZZO, RICHARD.....	1470
GIOVANNETTI, ERIN.....	807	1223			
GISH, ROBERT.....	368, 439, 521	GREENWAY, HUBERT.....	313		
GLEASON ROHRER, GWEN.....	498	GREINER, ALEXANDER.....	743, 1239		
GLENN, TARA.....	1169	GRIESINGER, MICHAEL.....	674		
GODDARD, SHANNON.....	428	GRIFFITHS, KENNETH.....	498		
GOEB, YANNICK.....	941, 1371	GRISSOM, MURRAY.....	920, 1329, 1330		
GOGGIN, SAMANTHA.....	563	GROGAN, BRIAN.....	1194		
GOLD, JEFFREY.....	759, 975, 976, 1183	GROSS, MATTHEW.696, 769, 958,			
GOLDEN HILL POST ACUTE.....	1450	984, 1032, 1253			
GOLDEN LIFE ADHC.....	1457	GROSSMONT HOSPITAL.....	1434		
GOLDFINGER, SARAH.....	467	GROSSMONT HOSPITAL DP SNF.			
GOLDING, IAN.....	1241	.....	1445		
GOLDSTEIN, EDWARD.....	639, 1402	GROSSMONT POST ACUTE CARE.			
GOLDSTONE, ADAM.....	1571	.....	1445		
GOLLOGLY, HEIDRUN.....	1598, 1615	GROSSMONT SPRING VALLEY			
GOMEZ, DANIELA.....	639, 1402, 1403	FAMILY HLTH CTRS INC.292, 293,			
GOMEZ, JUANITA.748, 1313, 1466, 1512		294, 295, 296, 297, 298, 299			
GOMEZ, LESLIE.....	807, 1075	GROSSMONT SPRING VALLEY			
GONZALES, MICHELLE.....	356	FAMILY HLTH CTRS INC,.....	651		
GONZALEZ, ANDRES.....	729, 1385	GROVE, JAY.....	783, 1048, 1430		
GONZALEZ, CLAUDIA.....	1477	GRUNVALD, EDUARDO.....	1147		
GONZALEZ, LISA.....	816, 1102	GUADARRAMA, IGNACIO.615, 672,			
GONZALEZ-GARCIA, CAROLINA.1535		1075			
GOODRICH, ANDREW.....	822	GUALTIERI, CHRISTOPHER.....	1206		
GOODWIN, RACHEL.....	817, 1104	GUAN, HOWARD.....	1392, 1393, 1657		
GORDON, BRENT.....	1241	GUARDADO-SOTO, RAQUEL.722,			
GORDON, CHRISTOPHER.....	365	1465			
GORGES, RANDA.....	369	GUERIN, CHRIS.....	830, 1120		
GORHAM, LAURA.696, 769, 1032, 1253		GUIDI, CASEY.....	786, 1418		
GOSMAN, AMANDA.....	1374				

H

HA, THU.....	467, 468, 1076
HACHOLSKI, MARK.....	499
HACINAS, REYNALDO.....	394, 615
HAI, FAIZI.....	520
HAIGHT, BRUCE.955, 956, 1002, 1598,	1599, 1615
HALEY, JESSICA.....	743, 766, 767, 1241
HALGEDAHL, YI.....	446, 447, 658, 1411
HALPERIN, JASON.....	1421
HALVORSON, PAULA.....	787
HAMDAN, AYAD.....	837
HAMED, JACQUELYN.....	785
HAMID, WAHIDA.....	358, 715
HAMILTON, LISA MARIE.....	397, 499
HAMMETT, ERIN.....	337
HAMMOND, CHARLES.....	841, 1141
HAMOUIE, JUDY.1558, 1565, 1571, 1599	
HAN, ANGELA.....	1386
HAN, FREDERICK.....	970, 1058
HAN, KYOUNG.....	1047
HAN, SULKI.....	1558, 1599
HANLEY, LAUREN.340, 376, 425, 543,	544, 654
HANNA, LINDSAY.....	808
HANNAWI, ANDREW.....	1184
HANNSUN, GEMMY.....	921, 1330
HANONO, ABRAHAM.....	1582
HANONO, HELFON.....	1582

M. Lista de médicos de atención primaria

HANSEN, JOHN.....	564	HERNANDEZ, JOANNA.....	434	HOMESLEY, SUSAN.....	1626
HANSEN, LAWRENCE.....	894, 1232	HERNANDEZ, MIRIAM.....	1395	HONG, KIMBERLY.....	793, 1050
HAPKE, ELENA.....	589	HERNANDEZ, RALPH.....	622, 676	HONOLD, JOSE.....	1170
HARKNESS, RUMIKO.....	808, 1076	HERNANDEZ, SILVIA.....	1512	HOO, PAMELA.....	874, 1584, 1635
HARMIS, NATASHA.....	646	HERSKOVITZ, SCOTT.....	1253	HOOPER, BONNIE.....	665, 731, 1077, 1078
HAROUSH, GAL.....	1076	HETTIG, JUDITH.....	358, 468	HOOPES, DAVID.....	1324
HARPEL, SHERYL.....	358	HEYMAN, BENJAMIN.....	837, 838	HOREISH, ADAM.....	686
HARRELL-BURDER, BEVERLY.....	674	HIBBS, NICOLE.....	565	HORGAN, SANTIAGO.....	934, 1360
HARRINGTON, BARBARA LORRAINE.....	468	HIETALATI, SAMANTHA.....	856, 1170	HORIZON CBAS.....	1457
HARRIS, JEFFREY.....	883, 1223	HIGGINS, JOSHUA.....	746, 904, 1300	HORKY, LAURA.....	921, 1330
HARRIS, LAURA.....	1470	HIKES, RYAN.....	1419	HORMOZDYARAN, SANAYA.....	565
HARRIS, LISA.....	869	HILDRETH, AMBER.....	1132	HORNBEAK, KIRSTEN.....	725, 824, 1115
HARRIS, PAMELA.....	712, 1010, 1411, 1412	HILL, CARLA.....	649, 1405	HORNEY, KRISTAN.....	469
HART, BECKY.....	1076	HILL, GENIELYN.....	468, 1077	HORTON, LUCY.....	1142
HARTFORD, NICOLE.....	662	HILL, LINDA.....	586, 1125, 1126	HOSALKAR, HETAL.....	795
HARTMANN, PHILLIPP.....	1273	HILLCREST HEIGHTS HEALTHCARE CENTER.....	1450	HOSSEIN ZADEH MALEKI, ANA.....	689, 1391
HARVEY, SCOTT.....	863, 1195	HILLDALE HABILITATION CENTER.....	1445	HOURIHAN, KEITH.....	967
HASAN, AWS.....	834, 1132	HILLIARD, THESALONICA.....	469, 1077	HOUSELY, ALEXIS.....	926
HASEGAWA, CHRIS.....	904, 1300	HINCHCLIFF, KATHARINE.....	943, 1376	HOWE, STEVEN.....	935, 993, 994, 1407
HASHEM, SHIVA.....	324	HINES, TAYTE.....	1388	HOXMEIER, KRISTA.....	578
HASTANAN, CAROL.....	365	HINKLE, CORINNE.....	961	HSIEH, TUNG CHIN.....	946
HASTIE, ELIZABETH.....	1147	HINSHAW, PAUL.....	761, 1392	HSU, CHRISTOPHER.....	1558, 1572, 1600
HATTANGADI GLUTH, JONA.....	1323	HIRSCH, JENNIFER.....	818, 1105	HU, JINGJING.....	897
HAWKINS, MELISSA.....	1423	HIXSON, THOMAS.....	1599	HUANG, MARIA.....	1288
HAZELBAKER, PAUL.....	526	HO, AMIEE.....	691, 1584, 1633, 1634	HUANG, PETER.....	1551
HEAD, KRISTIN.....	730, 752, 970, 1011, 1077	HO, HOANG.....	1634	HUBLEY, PAUL.....	328
HEALTHY CONNECT SAN DIEGO.....	1676, 1677	HO, MYLIEN.....	376	HUDSON, HENRY.....	956, 1565, 1572, 1585, 1600, 1615, 1635
HEINRICI, ALEKA.....	499, 621	HO, TRAM.....	1549	HUEGE, STEVEN.....	1482
HEKMAT, RAZI.....	439	HOANG, CHI.....	469	HULL, ANDREW.....	734, 853
HENDERSON, PHILIP.....	526	HOANG, KENNY.....	1612, 1659	HUNG, JANICE.....	1600, 1616
HENDERSON, TREVOR.....	564	HOANG, KEVIN.....	1634	HUNTER, JACOB.....	905, 1301
HENDRIX, JEFFERSON.....	621	HOANG, MAI.....	864, 1195	HUNTER, WENDY.....	413, 1254
HENLEY, MEARA.....	594, 595	HOANG, VY.....	382, 565	HURST, MICHAEL.....	633
HENNEIN, LAUREN.....	740, 763, 978, 1025, 1206, 1207	HODGKIN, EDWARD.....	365	HUSSEMAN, JACOB.....	885, 1224, 1225
HERMAN, ANDREA.....	643	HOFFMAN, STEVEN.....	1634	HUSTANA, LARA.....	1585, 1635
HERMAN, RACHEL.....	705	HOGAN, ROSELYNN JOY.....	469	HUTCHISON, HEIDI.....	725
HERMANSON, KATHLEEN.....	666	HOGARTH, MICHAEL.....	844, 1148	HUYNH, CHI.....	1636
HERMES, MARY.....	589	HOGUE, BRENNNA.....	823, 1115	HUYNH, LOAN.....	1637
HERNANDEZ, CRISTINA.....	725, 823, 1115	HOLLICK, NATALIE.....	349	HUYNH, PAUL.....	1207, 1636
HERNANDEZ, JESSICA.....	1011, 1012, 1412, 1413	HOLMER, ARIELA.....	834	HYLTON, DIANA.....	723, 795, 969, 1053, 1430
		HOM, DAVID.....	884, 1224		
		HOM, GREGORY.....	1635		
		HOM-TEDLA, MARIANNE.....	864, 1196		

M. Lista de médicos de atención primaria

IBANEZ, SIR CEDRIC.....	317	JAMISON, KAREN.....	526	JULIAN, FIDES.730, 801, 802, 1062,	
IBARRA, MARTHA.322, 615, 616, 1078,		JANNESARI, ROYA.....	752	1063	
1398		JARDON, JAVIER.....	380	JUSTINO, HENRI.....	1242
IBRAHIM, MAGED.....	405	JAZBEH, SAMMER.....	922, 1331, 1332	K	
ICHWAN, DANIEL.....	725	JENKINS, ENCHANTA.....	640	KAFRI, HASSAN.....	373
IGNACIO, ROMEO.....	1360	JENNINGS, AMY.....	1536	KAHL, NICHOLAS.....	310, 394
ILCHENA, ALESANDRA.....	487	JENSEN, ADRIENNE.....	358	KAKAIYA, ROSHNI.....	337
IMAM, SYED.....	1397, 1533	JENSEN, BRIAN.....	1039, 1494	KALBAKJI, NATALY.1546, 1565, 1572,	
IMPERIAL BEACH HEALTH CENTER.		JEONG, MATTHEW.....	526	1585, 1601, 1616, 1637	
.....	101, 1666, 1678	JEWISH FAMILY SERVICE OF SAN		KALRA, ANKUR.....	1551, 1616, 1660
IMPERIAL BEACH HEALTH CENTER, .		DIEGO.....	1678	KAMOTO, LYNN.....	647
.....	412	Ji, AMANDA.....	656	KANNAN, SWATI.....	1109
IMUS, PAUL.....	418	JIANG, JUN.....	1148	KANTAS, PARIS.....	616, 673
INDA, PRISCILLA.....	354, 699, 720	JIANG, WEN.....	765, 980, 1225	KARANDE, PRACHI.....	706, 791, 1004
INDRA, SEAN.....	984, 1254	JIMENEZ BACARDI, ADRIA.....	1288	KARAPETIAN, ELENA.....	1573
INGULLI, ELIZABETH.....	1278	JIMENEZ, ANDREA.705, 790, 791,		KARI, ELINA. 885, 886, 980, 1225, 1226	
INOCELDA, ANDREW.....	667	1004		KARMAKAR, KANKA.....	566, 1288
INSTONE, SUSAN.....	470, 1079	JIMENEZ, KRYSTAL.....	328	KARP, MICHAEL.....	662
INTERFAITH COMMUNITY SERVICES.		JIMENEZ, NANCY.....	1536	KASAI, SARAH.....	1625
.....	1666	JIN, MAN.....	870, 871, 1208	KASAWA, JOHN.....	365
IRAGUIMADOZ, VICENTE.....	859, 1184	JINDAL, ANUJA.737, 759, 976, 1023,		KATZ, JONATHAN.....	946, 1381
IRIZARRY, NICOLE.....	590	1288		KATZ, YISRAEL.....	845, 1148
ISAIAS, AGNELA.....	349	JOHN, TANNER.....	1126	KATZMAN, BARRY.1546, 1558, 1602,	
ISAKARI, MARCIA.....	1203	JOHNSON, CHRISTINE.....	1042	1617, 1637, 1638	
ISHIMINE, PAUL.....	1254	JOHNSON, CHRISTOPHER. 1612, 1659		KATZMAN, LEE.....	1555, 1601
ITURBE-ALESSIO, IGNACIO.....	679	JOHNSON, DANIEL.....	411	KAUFER, DAVID.....	633
IVANOV, MARGARET.....	844	JOHNSON, JENNIFER.....	1404, 1536	KAUFHOLD, ANNE....311, 315, 500, 622	
IYENGAR, RADHA.....	319, 320	JOHNSON, KENNADY.....	1344	KAUFMAN, JENNIFER CHILYN. ...	500
IYER, VICTORIA.....	808	JOHNSON, KENNETH.....	679	KAUNITZ, GENEVIEVE.....	1109
J		JOHNSON, SHAWNA AKIKO.....	470	KAUR, JATINDER.....	397, 459
JABBOUR, MOUSSA.....	845, 1148	JOLICOEUR, MEGAN.....	832, 1126, 1127	KAYE, WALTER.....	1513
JABRI, ZAIN.....	370	JOMOC, CAITLIN.....	874, 1214	KAZEM, AHMAD.....	487
JACKSON, DANA.....	383, 428	JONES, CHRISTA.....	808, 1079	KAZEM, HARON.....	325
JACKSON, MADELEINE.....	1371	JONES, TYESHIA.....	967, 968, 1041	KEARNS, MARK.....	944
JACKSON, TAYLOR.....	1254	JORDAN, JAMIE.....	565	KEDDINGTON, JOAN. 1552, 1617, 1660	
JACOB HEALTH CARE CENTER LLC.		JOSHI, WEENA.....	770, 958, 1033, 1255	KEEN, WILLIAM.....	800
.....	1450	JOSHI, YASH.....	1512	KEFLEZIGHI, BAHGHI.....	500
JACOBS-KLEISLI, MILAGROS.....	350	JOSHUA, JISHA.....	918, 1321	KELCHNER, MATTHEW.....	311
JACOBSEN, BRADLEY.....	1025, 1208	JOYCE, ROBERT.....	1662	KELLEHER, BRIDGET.407, 408, 785,	
JACOBSEN, GARTH.749, 934, 1360,		JU, NATHANIEL.....	659, 1018, 1419	1012, 1013, 1413, 1414	
1361		JUANG, PATRICIA.....	830, 1121	KELLER, BENJAMIN.....	1374
JAFFRAY, JULIE.....	1276	JUAREZ, AMERICA.....	1461	KELLOGG, KRISTEN.....	359
JAFFRAY, PAUL.....	921, 1331	JUAREZ, LETICIA.....	386, 584	KELLY, KATHERINE.....	597, 598, 1017
JAIN, ALEXANDRA.....	705	JUAREZ, PATRICIA.....	566	KELNER, MICHAEL.....	900, 1236, 1237
JAMES, CHRISTINE.....	1051			KEMP, KATHRINE.....	470, 1079

M. Lista de médicos de atención primaria

KESANAPALLI, DEEPTHI.....566	KLOBERDANZ, KELSEY..... 471	LA MAESTRA CHC EL CAJON
KESHAVARZI, SARA.....752	KLUEMPER, NICOLE.....1314, 1513	BROADWAY..... 71, 72, 73
KHAFAJA, MOHAMAD..... 1482, 1513	KNUTSON, THOMAS.....784	LA MAESTRA CHC EL CAJON
KHALEEL, AMMAR.....1460	KODSI, ALICIA.....383	BROADWAY, 368
KHALIGHI, PAYMAN.....1638	KOH, STEVE.....1465	LA MAESTRA COMMUNITY HEALTH
KHALIL, VADY.1547, 1559, 1566, 1573,	KOHATSU, KAREN.....1196	CENTERS.1665, 1667, 1668, 1671, 1672,
1586, 1602, 1617, 1618, 1638, 1639	KOHOUT, KATHRYN.....1386	1673, 1674, 1675, 1676
KHAMISA, SORAIYA..... 1513	KOLB, FREDERIC..... 1377	LA MAESTRA FAMILY CLINIC INC.74,
KHAMISHON, BORIS.....1185	KONDILI, DHIMITER..... 922, 1332	75, 113, 114, 124, 125, 137, 185, 186, 199,
KHAN, ALIYA.....377	KOO, ANITA..... 692, 1003	200, 201
KHAN, FAHAD.....1639	KORMANIK, PATRICIA... 731, 809, 1414	LA MAESTRA FAMILY CLINIC INC, .
KHAN, MATTHEW.....470	KORSAND, SID..... 350	.....368, 438, 516
KHAN, SHAHFAR.....1255	KOSEL, MATTHEW.....611, 612	LA MESA HEALTHCARE CTR.....1446
KHARE, MANASWITHA.....1289	KOSOY, DANIEL.....1361	LA MESA PEDIATRICS..... 101, 102, 103
KHATIB, NORA.....1208	KOTHA, PURUSHOTHAM..... 946	LA MESA PEDIATRICS, .....415
KHIEU, TINA.1559, 1573, 1586, 1618,	KOTHA, ROSHAN..... 964	LA PALOMA HEALTHCARE CTR..1447
1639	KOUSARI, JHALEH..... 595, 596	LABIB, MICHAEL.....1314, 1514
KHINDA, SUNEHA..... 1581, 1639	KOZMA, BONITA.....1110	LACH, REBECCA..... 329, 501
KI, TRISH..... 471, 1080	KRAK, MICHAEL.....662	LAFORTEZA, JOZELLE.....1081
KIDANE, ZINNIA.....1080	KRAMER, MELISSA.....456	LAGO HERNANDEZ, CARLOS.846,
KIDDER, BRENDAN..... 500	KRAPES, MICHAEL..... 1039, 1494	1149
KIM MCMANUS, OLIVIA.737, 760, 977,	KRAUSE, MARTIN.723, 799, 969, 1057,	LAI, AMARA..... 397
1185	1431	LIDLAW, JOHN..... 1514
KIM, JOHN.....1203	KRESHAK, ALLYSON.....824	LALITHAKUMARI, ARYA.....527
KIM, MICHAEL.....1027, 1425	KRIJGER, LISA.....526	LAM, ANNE..... 1587, 1640
KIM, MICHELLE.....1046	KUGEL, SAMUEL.....1488	LAM, DAVINA.....1302
KIM, PHILIP.875, 1215, 1573, 1586, 1587,	KUIOKA, TROY.....387	LAM, KHANH..... 670, 1063
1640	KULASA, KRISTEN..... 831, 1121	LAM, MICHAEL..... 846, 1149
KIM, YUHEE.....422	KULISCHAK, JOHN.....1587, 1640	LAMALE-SMITH, LEAH.739, 762, 865,
KINDRED HOSPITAL SAN DIEGO.	KULKARNI, NISHAT.....1470, 1500	1197
.....1434	KUMAR, AVNEE..... 992, 1432	LAMANTIA, MICHELE.... 440, 527, 633
KING CHAVEZ HEALTH CENTER.152,	KUMAR, SOMA..... 1132	LAMBERT, GAGE.....1302
153, 170, 171, 172	KUO, DENNIS.....1276	LANDEO GUTIERREZ, JEREMY....1281
KING CHAVEZ HEALTH CENTER, . 515	KUPPALLI, KRUTIKA.....842, 1143	LANDIS, SARAH..... 579
KING, MARY.....1552, 1618, 1660	KUROSACA, MOMO.....1127	LANE, BRIAN.....1171
KINGDON, JOANNA. .. 984, 1033, 1255	KURZ, TROY.....1461	LANE, KIMBERLY.673, 712, 731, 809,
KINGDON, TYLER.....1158	KUSNEZOV, NICHOLAS. ...711, 941, 1371	947, 1081, 1082
KIVIAT, ANNETTE.746, 776, 991, 1038,	KUTZ, CRAIG.....824, 825, 1116	LANUZA, MARK.....434
1301	KVIATKOVSKY, MILLA. ..845, 846, 1149	LAPINA, LORI..... 579
KLAREN, AMANDA..... 1574, 1640		LARA, LESLEY..... 622
KLEIN, DAVID.....864, 865, 1196	L	LARKINS, PHILIP..... 777
KLEMENCIC, TAHNEE..... 970, 1081	LA COSTA HOUSE.....1439	LARSEN, JULIE.....1204
KLING, KAREN.750, 784, 993, 1041,	LA FUENTE POST ACUTE..... 1454	LARSEN, STEVEN.....1641
1374, 1375	LA JOLLA NURSING AND REHAB	LASSWELL, EVE..... 916, 1482
	CTR.....1444	LAU, JANICE..... 1642

M. Lista de médicos de atención primaria

LAU, KUEN CHINE.....	1641	LEONARD, LISA.....	1423	LLOYD, MATTHEW.....	580
LAURENT, LOUISE.....	734, 854, 1162	LEPEZ, DAVID.....	623	LOEFFLER, ALLISON.341, 377, 426,	
LAVERTY, CHAMINDRA.....	1185	LERNER, JONATHAN.670, 714, 1059,		546, 547, 654	
LAW, KAREN.....	329, 434	1384		LOGAN HEIGHTS FAMILY HEALTH	
LAWRIE, ALISA.....	566	LEUIN, SHELBY.....742, 766, 1030, 1226		CENTER.172, 173, 174, 175, 176, 177, 178,	
LAZAR, DAVID.....	1375	LEUTE, ERIC.....	434, 623	179, 180, 181, 182, 183, 184, 185, 188, 189,	
LE DZUNG, THE.....	900, 1237	LEVERONE, NICHOLAS.....	1150	190, 191, 192, 193, 194, 195, 196, 197, 198,	
LE, CRYSTAL.....	758, 1171	LEVINE, MATTHEW.....	491	199	
LE, DIANA.....	387, 585	LEVY, MICHAEL.....	1365	LOGAN HEIGHTS FAMILY HEALTH	
LE, HUAN.....	1321, 1322	LEVY, PHILLIP.....	1603	CENTER,.....	516
LE, JACQUELIN.....	1642	LEWIS, MICHAEL.....	1379	LOHNES, ELLIE.....	580
LE, TAM.....	1574, 1662	LEWIS, PRIYA.....	1378	LONGARDNER, KATHERINE.1186,	
LE, TAYLOR.....	721	LI, ALEXANDRIA.....	1209	1187, 1516	
LEBENSOHN CHIALVO, FLORENCIA.		LI, JINGHONG.....	825, 971, 1431	LOPER, KAREN.....	567
.....	1314, 1315, 1514	LI, XIA.....	1483, 1515	LOPEZ, JOANNA.....	1467
LEDBETTER, ALEX.....	1482, 1515	LIEBER, CAROL.....	314, 412, 472	LOPEZ, MARIBEL.....	1537
LEE, AUSTIN.....	1618	LIFE CARE CENTER OF ESCONDIDO.		LOPEZ, MARIO.....	580
LEE, BEGEM.....	1289	.....	1443	LOPEZ, NICOLE.....	931, 1353, 1354
LEE, DAVID. 860, 1185, 1186, 1483, 1515		LIFE CARE CENTER OF VISTA.	1454	LOPEZ, XIMENA.....	989, 1289
LEE, HAEWON.....	745, 1295	LIM, IMELDA.....	429, 430, 472, 996	LOSTETTER, ADRIENNE.....	460
LEE, HEE.....	809	LIM, ROSEMARIE.....	1004	LOVE, VICKI.....	472
LEE, JASON.....	1566, 1574, 1642	LIN, HENRY.....	1643	LOVEJOY, AMY.....	770, 948, 1033, 1256
LEE, JENNIFER.....	1603	LIN, JOYCE.....	906	LOVERN, JENNIFER.388, 389, 487,	
LEE, JOSEPH.....	623	LIN, SHUANG.....	366	488	
LEE, KAREN.....	1138	LIN, TOM.....	1273	LOVING CARE ADHC.....	1458
LEE, MICHAEL.....	527	LINDA VISTA HEALTH CARE CTR.140,		LOZANO, JUAN.....	676, 677
LEE, SALLY.....	1602, 1619	146, 147, 148		LOZIER, JEFFREY.....	1046
LEE, SANDRINE.....	501	LINDA VISTA HEALTH CARE CTR, 516		LU, STEPHANIE.....	527
LEGER, GABRIEL.....	860, 1186	LINDBACK, SARAH.....	460	LU, TAMMY.....	359, 473
LEHNERT SCHUCHARDT, ELEANOR.		LINDEMAN, KURTIS.....	501	LUJAN, ARLEEN.....	567
.....	1242	LINDEMANN, CHRISTINA.....	1302	LUKACZ, EMILY.....	832, 833, 1130
LEIBEL, SYDNEY.....	1239	LINKE, SARAH.916, 1315, 1483, 1515,		LUM HO, RACHEL.....	1393, 1394
LEININGER, DANIEL.....	954	1516		LUM, YUIN-WAH.....	430
LEMON GROVE CARE AND REHAB		LIOTTA, BENJAMIN.....	825, 1116	LUONG, TRAN.....	906, 907
CTR.....	1446	LIPSCHITZ, LISA.341, 377, 426, 545,		LUSBY, FRANKLIN.....	1588
LEMON GROVE FAMILY HEALTH		546, 654		LUSCHWITZ, BRIAN.....	662
CENTER.105, 106, 107, 108, 109, 110, 111,		LISH, JONATHAN.....	502	LUU, DANIEL.....	1108
112, 113		LIU BARBARO, DOROTHY.....	420		
LEMON GROVE FAMILY HEALTH		LIU, ANDREW.....	1023		
CENTER,.....	423	LIU, JESICA.....	567		
LENHART-PENDERGRASS,		LIU, JIE.....	502		
PATRICIA.....	745, 988, 1036, 1282	LIU, SHANGLEI.....	931, 1353		
LENNON, RYAN.....	472	LIU, TIMOTHY.....	1516		
LEON, FLOR.....	579	LIU, YUNXIANG.....	1209		
LEONARD, BEVERLY.....	322, 650	LLANES, BENJAMIN.....	1643		

M

MACIAS, ALISSA.....	388, 596
MACINTYRE, ELIZABETH.....	456
MACKAY, GILLIAN.....	739, 865, 1197
MADANY, GEORGE.....	567
MADERA RIVERA, PAULA.710, 782,	
1350, 1351	
MAGEE, ANNA.....	1476

M. Lista de médicos de atención primaria

MAGINOT-CHESHER, TAMARA.916, 1315, 1483, 1517	MARTIN, HALEY..... 907, 1302	MCGRAW, JOSEPH.1547, 1566, 1575, 1604, 1620, 1644, 1645
MAGIT, ANTHONY.886, 887, 1226, 1227	MARTIN, RIA..... 473	MCGUIRE, WILLIAM..... 918, 1322
MAGNOLIA ADULT DAY HEALTH CARE.....1456	MARTIN, THOMAS..... 1143	MCHENRY, KATHRYN..... 398
MAGNOLIA POST ACUTE CARE... 1441	MARTINEZ ANDREE, INGRID. 568	MCINTYRE, RYAN..... 315
MAGOS, DANIEL.....1471	MARTINEZ MURGUIA, IRENE.444, 580	MCKENNETT, MARIANNE..... 329
MAHDAL, SUZAN.....423	MARTINEZ, ARMANDO..... 847, 1150	MCLAUGHLIN, ERIK..... 1127
MAHENDRAN, SRIVIDYA..... 568	MARTINEZ, CAROLYN..... 473, 1082	MCMAHON, SHARON..... 350
MAHONEY, KAITLYN..... 590	MARTINEZ, LESLY.1018, 1019, 1419, 1420	MCMURREN, BRITTANY..... 1559
MAJERSKI GONZALEZ, MANDY... 640	MARTINEZ, NANCY..... 324	MCNEALY HOUSE.....1447
MAJITHIA, AMIT..... 847, 1150	MARTINEZ, NORAYMA.....1471	MEADOWS, AUDRA..... 866, 1198
MAK, ROBERT.....1278	MARTINEZ, STEPHANIE.1462, 1484, 1517, 1518	MEAGHER, RAISHELLE..... 1537
MALAK, LAWRENCE..... 1462, 1517	MASCARENO, EFRAIN. 692, 693, 1552	MEDIC, IGOR..... 950
MALEK, MIKHAIL..... 755	MATHIAS, WILLIAM..... 1395	MEDINA, ALEXANDER..... 435
MALEKMADANI, ARIENNE..... 1399	MATIAS, JULIE..... 598, 607	MEDINA, RUBELETA..... 1083
MALEKSHAMRAN, KEYVAN..... 405	MATICH, BRANKO..... 503	MEHTA, NOOPUR.....776
MALHOTRA, ARATI..... 606	MATOBA, NANA..... 685, 857, 1172, 1173	MEKEEL, KRISTIN..... 1380
MANCHEL, BRUCE..... 355, 648	MATSHE, ZENZIWE..... 397, 754	MELBER, DORA.683, 757, 854, 952, 973, 974, 1021, 1162, 1163
MANGINE, REGINA..... 650	MATSUOKA, AKIHIRO.887, 888, 1227, 1228	MELENDEZ BERRIOS, IARA DEL.341, 377, 426, 547, 548, 655
MANI, NASRIN..... 344, 380, 641	MATTHESS, JANETTE..... 810	MELENDEZ, ARIANA.... 866, 1198, 1199
MANI, PARVIN..... 1198	MAUHILI, KENNA..... 1039, 1494	MELGAR, MONICA..... 503
MANNEN, JOSEPH..... 1555	MAXWELL, BENJAMIN..... 1484	MELTZER, VIRGINIA..... 473
MANNINO AVILA, ELIZABETH.... 1289	MAXWELL, MELISSA..... 1465	MENDENHALL, ANNA..... 391
MANNINO, ELIZABETH..... 421	MAY, LOUIS..... 370, 634, 719	MENDES, CHANTAL..... 697, 770, 1257
MANRIQUEZ-CASTILLO, ERENDIRA. 568	MC ELROY, CARTER..... 1345	MENDEZ, ADRIANA.... 1494, 1495, 1541
MANSOUR, DAVID..... 718, 1044	MCADAMS, JOSEPH..... 907, 1302	MENDEZ, ANDRES..... 916, 1484
MANSY, TAMARA..... 370	MCAULEY, ROBERT..... 1476	MENDEZ, DIEGO..... 342, 378, 640
MANZO, CORINA..... 1082	MCCALLION, PATRICK..... 695	MENDEZ, JESUS..... 354
MARANO, RACHEL..... 1290	MCCAMMACK, BRADLEY..... 456, 457	MENDOZA, GRETTEL MARIE.474, 1083
MARC AURELE, KRISHELLE.856, 1171, 1172, 1290	MCCANDLESS, RACHEL..... 982, 1242	MENDOZA, RAYMUNDO..... 1620
MARCINIAK, ROMAN..... 527	MCCARTHY, KATHRYN..... 752	MENON, POOJA..... 329
MARDACH, REBECCA..... 1136	MCCLEAN, ESMERALDA.875, 1588, 1644	MERAKEY ALLOS..... 1679
MARKS, ROBERT..... 922, 1333	MCCOWN, BARRY..... 716, 717, 967	MERALI, MURTAZA..... 1604
MARLAY, GREG..... 1619	MCCULLEY, DAVID..... 1173	MERCER, KELLY..... 385, 444, 581
MAROLLA, ALICE..... 927	MCCULLOUGH, DEIRDRE.683, 952, 1162	MERRILL, COREY..... 908, 1303
MAROSOK, MICHELLE..... 1082, 1386	MCCULLUM, TIFFANY..... 1316, 1518	MERRILL, SARAH..... 330
MARR, RYAN.1547, 1559, 1566, 1574, 1588, 1603, 1619, 1644	MCDANIEL, MICHELE... 826, 1116, 1256	MESIWALA, ADNAN..... 984, 1257
MARSHALL HOUSE..... 1454	MCFARLAND, NATHAN..... 421	MESTAN, KAREN..... 857, 1173
MARSHALL, LAWRENCE..... 937, 1365	MCGEE, JACQUELINE..... 668, 782	METCALF, ASHLEY..... 1257
MARSTON, JACQUELINE..... 502		MEYER, MEGAN..... 795, 1053
		MEYERHOF, GRETA..... 1495, 1541, 1542
		MICHAEL, RAMI..... 370, 719
		MICHALOWSKI HOME..... 1448

M. Lista de médicos de atención primaria

MICK, SHARON..... 810, 811, 1083, 1084	MONTES, VIVIAN.....776	MURTHY, NIKHIL..... 669, 937
MID-CITY COMMUNITY CLINIC.143, 144, 145, 228	MONTEZ, REBECCA .....1496	MUTH, NATALIE.....320
MID-CITY COMMUNITY CLINIC, ... 517	MONTGOMERY HOUSE..... 1454	N
MIDORO, ABEGAILLE...996, 997, 1084	MONTGOMERY, KEITH ALLEN.1013, 1414	NACOSTE, LAKEISHA..... 812
MIGNEA, DAVID..... 356, 388, 590	MONTOYA, JESSICA..... 1316, 1518	NADI, FAHIMA..... 371
MIKUT, ALYSSA.....1204	MOODLEY, AMARAN..... 1143	NAGELBERG, JODI.363, 491, 831, 1121, 1122
MILDER, EDMUND..... 1277	MOOLANI, RAMESH..... 680	NAGHI, JESSE..... 681
MILES, RENEE..... 1477	MOOLANI, UJJALA..... 687	NAGNUR, PRITI.....383
MILLAR, MELISSA .....1054	MOONEY, PATRICIA..... 1387	NAIDZIONAK, ULADZISLAU. 680, 1151
MILLER, DONALD..... 457	MOOR, TRACY.....1589, 1645, 1646	NAIK, SHILPA.....383
MILLER, EVA..... 1084	MOORE, BRIAN..... 963, 1405	NAJAFI, DAVID. ....556
MILLER, JULIE 1429	MOORE, SHAVON. ....1484, 1485, 1519	NAJAND, SADAF .....1043
MILLER, LAUREL.....581	MOORE, THOMAS. ....734, 854, 1164	NAKAMITSU, ABIGAIL.....1303
MILLER, SCOTT..... 1130	MORA, WENDY..... 965, 1028, 1426	NAKAMURA, MELANIE..... 398
MILLS, BRAD..... 1518	MORAL, JOHN..... 710, 711	NAKAMURA, TIFFANY.....1160, 1519
MILLS, DAVID..... 985, 1257	MORALES, ALEJANDRA 504	NARANJO, RODRIGO.....528
MINKA, GENEVIEVE.697, 770, 958, 1258	MORAN, TIFFANY.....1085	NARAYAN, ARCHANA 371
MINOKADEH, ANUSHIRVAN..... 723	MOREIRA, LUCILA .....461	NARAYAN, HARI.....743, 767, 982, 1243
MIRACLE, ANGELYN..... 970, 1406	MORRIS, CHAD.....722	NARAYANAN, MEENA .....528
MIRON, JEAN-PHILIPPE 1518	MORRIS, SHEILA.....691	NASSERY, KRISTEN. 1040
MISHRA-OCCHINO, SEEMA. 1259	MORRISON REYES, JOSHUA.1547, 1567, 1575, 1590, 1604, 1605, 1620, 1621, 1646	NASSIR, BASSAM..... 366
MISSION HILLS POST ACUTE CARE. .....1450	MORTIMER, DORI.....461	NATH, DEVARSHI.389, 598, 599, 600, 1388
MISTRY, CHETAN..... 351	MOSHTAGHI, OMID. 957	NATHAN, CARLY. 819, 1105, 1106
MITCHELL, CATHY.....394	MOSQUERA, DIANA 351	NAUDIN, VERONICA..... 663
MIZOGUCHI, LIANNE. 1589, 1645	MOSTOFIAN, EIMANEH.390, 391, 604	NAVARRO, VANESSA.435, 624, 998, 1399
MIZZELL, ANNA.....800, 1060	MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC. 1453	NEGRON, RICARDO.....407
MLNARIK, ANASTASIA. 568	MOUSSAVIAN, MEHRAN.374, 532, 636	NEIGHBORHOOD HEALTHCARE ESCONDIDO. ....88, 89, 90, 91, 93, 94
MODHWADIA, MAMTA 1500	MOVAGHAR, MANSOOR.741, 763, 871, 978, 1026, 1209, 1575	NEIGHBORHOOD HEALTHCARE ESCONDIDO, 401
MOFFATT, KYRRA.....418	MOYA, MARY..... 330, 624	NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER.136, 137
MOHAMEDALI, BURHAN.681, 1158, 1390	MUELLER, DANA 1242	NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER, . .....459
MOHAMEDI, NADIA.....435	MUELLER, GEORGE..... 1361, 1362	NEIGHBORHOOD HEALTHCARE GRAND AVE. 91, 92, 93, 94
MOHAMMAD, AHMAD SHAH.689, 954	MUELLER, MATTHEW.....726, 826, 1116	NEIGHBORHOOD HEALTHCARE LAKESIDE. ....103, 104
MOHEBBI, ATHENA..... 811, 1085	MUHAMMAD, LAMA..... 1519	
MOLINOS, NICOLE .....418	MULVEY, CAOILFHIONN..... 811, 1085	
MOLL, ANGELA.741, 763, 978, 1025, 1209, 1567, 1575, 1645	MUNCADA, CAESAR..... 869	
MONAHAN, CAROLYN.....607	MUNCE, DANIELLE .....1150	
MONGA, MANOJ.....1381	MURPHY, CARMEL .....392	
MONTBLEAU, KARA..... 1259	MURPHY, JAMES 1324	
MONTES, DENISE.....1537	MURRAY, MATTHEW 1259	

M. Lista de médicos de atención primaria

OSORIO, JOSEPH.	938, 1365, 1366	PARKSIDE HEALTH AND WELLNESS CENTER.	1441	PERLMAN, TAMARA.....	1017
OSWALD, JESSICA.....	796, 1054	PARKWAY HILLS NURSING & REHAB.....	1446	PERREAULT, MARK.....	909, 1304
OTAY FAMILY HEALTH CLINIC.	44, 45	PARRY, LISA.....	749, 931, 1354	PERRY, ARTHUR.....	1590
OU, JOCELYN.....	1555, 1606	PARSONS, GENEVIEVE.....	413	PERTL, URSULA.....	663
OWEN, MICHAEL.....	322, 477	PARSONS, MEKRAE.....	1387	PETERS, JAMIE.....	1607
OZAKI, YOSHIHIRO.	697, 771, 958, 1260	PASTORE, SIMONE.....	414	PETITT, JOHN.....	371
OZCAN, ALI.....	985, 1260	PATEL, AARTI.....	1291	PETTIS, BETH.....	1090
P					
PADE, KATHRYN.....	1260	PATEL, AMAR.....	687	PETTUS, JEREMY.....	831
PADILLA, MICHELE.....	477	PATEL, CHARMI.....	894	PHAM, JENNIFER.....	688
PAGE, BIANCA.....	420, 488	PATEL, DEVIN.....	1381	PHAM, LILY.....	675, 753, 1018, 1118
PAI, SARAH.....	1088	PATEL, GITANE.1548, 1560, 1576, 1606, 1621, 1649		PHAM, MARTIN.....	669, 938, 1366
PAIK, JULIANA.....	411	PATEL, HEMANSHU.....	415	PHAM, QUYNH.....	336
PAKENHAM, KATE.....	731	PATEL, JANKI.....	732	PHAM, TONY.....	1649
PALLIA, CHRISTOPHER.....	713, 941	PATEL, JITENBHAI.....	398	PHAN, RYAN.....	1210, 1211
PALOMAR HEALTH.....	1434	PATEL, MITESH.....	1497, 1542, 1543	PHAN, TIFFANI.....	549
PALOMAR HEIGHTS CARE CTR... 1443		PATEL, SAGAR.....	972, 1432	PHREANER, NICHOLAS.....	800, 1060
PALOMAR MEDICAL CENTER..... 1435		PATEL, SARJAN.1548, 1560, 1577, 1606, 1621, 1648, 1649		PHUNG, AIVI.....	582, 1304
PALOMAR VISTA HEALTHCARE CTR. 1443		PATEL, VIJAY.743, 766, 980, 1031, 1229		PHUNG, RICHARD N V.....	1650
PALOMINO, MARY.....	331	PATHAK, SAGAR.....	773, 1273	PIANSAY, MARIA CORAZON. 352, 644	
PALOMINO, VERONICA.....	505	PATHWAY HOME SOLUTIONS INC. 1668		PICKETT, CHARLOTTE.866, 1199, 1200	
PANDHI, JAY.....	999	PATIAG, DANIEL . 477, 478, 1088, 1089		PIERCE, HEATHER.....	1291
PANDYA, BHUMIKA.....	1560, 1606	PATTERSON, MARY.....	989, 1271	PIEROS, JANELLE.....	331
PANICKER, CIBU.....	449	PATTERSON-HYATT, KIMBERLY.1317, 1522		PINA, RAQUEL.....	332
PANNARAJ, PIA.....	1144	PATTON, MICHAEL.....	1522	PINSON, KELSEY.....	867, 1200
PANSARA, MEGHA.....	1576	PAUL, MEGAN.....	1138	PINTO, ANITA.....	384
PAPA, RHETT.....	378, 416	PAULSON, KERRY.....	812	PIRTLE, KEYSHONE.....	715
PAPASTERGIOU, GEORGIOS.344, 380		PAVLOVICH, WENDY.....	569	PISINGER, PATRICIA.....	332
PARADISE VALLEY HEALTH CARE CENTER..... 1447		PEARCE, ALEX.....	918, 1322	PITTMAN, LILIANA.....	616, 724
PARADISE VALLEY HOSPITAL..... 1435		PEDROTTY, JOHN.....	331	PLANTE, CHARLES.....	325
PARAST, MANA.....	894, 1233	PELIO, DARREN... 747, 908, 909, 1303		PLASCENCIA, CINDY.....	1537
PARIKH, MILIND.....	371, 529	PENA, NICHOLAS.....	581	PLUCINIK, STANLEY.....	1553
PARK, BRIAN.....	985, 1261	PEOPLE ASSISTING THE HOMELESS. 1670		POAST, JENNIFER.....	634
PARK, DANIEL.....	634	PERDION, KAREN.....	819, 1106	POLICH, MICHELLE.....	1291
PARK, JAY.....	827, 1117	PERENS, ELLIOT.....	1279	POLIKOWSKI, SAMANTHA.... 816, 1102	
PARK, RONALD.....	457, 1034, 1261	PERESS, LILIA.....	1128	POLK, DAVID.....	1133
PARK, SOO.....	838	PEREZ, ALLYSSA.....	1089	POLLACK, LARRY.....	1362
PARK, TARI.....	569	PEREZ, PERLITA.....	331, 505	POLLEMA, TRAVIS.....	944, 995
PARKER, SHERINE.569, 771, 959, 1034, 1261		PERKINS, RACHEL.....	458	POLLEY, SHANNON.....	582, 1395
PARKS, MONICA.....	1422			PONCE, SONIA.....	614

M. Lista de médicos de atención primaria

POSADA, SEAN..... 506	R	RAYMOND, ALAIN.....961	
POSADAS, EMERITO. ... 607, 608, 1394		RAYTA, NICOLE.....1014	
POSTLETHWAITE, ALEJANDRA.1466, 1471, 1500		RACKHAM, KELLY..... 408, 409	RCH EAST COUNTY URGENT CARE.....1714
POTENZA, BRUCE..... 932, 1355		RADOJEVIC, NATASHA..... 1318, 1523	RCH MID CITY URGENT CARE.....1714
POTOK, OLIVIA..... 847		RADY CHILDRENS CONVALESCENT HOSPITAL.....1450	RCH NORTH COUNTY URGENT CARE.....1714
POUNTNEY, MARLENE. 319, 604, 605		RADY CHILDRENS HOSPITAL SAN DIEGO..... 1435	RCH OCEANSIDE URGENT CARE.1714
POUSTI, SHEIVA.....1650		RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN.1682, 1683, 1684, 1685, 1686, 1687, 1688, 1689, 1690, 1691, 1692, 1693, 1694, 1695, 1696, 1697, 1698, 1699, 1700, 1701, 1702, 1703, 1704, 1705, 1706, 1707, 1708, 1709, 1710, 1711, 1712, 1713, 1714	READ, TRENTON.....701, 778, 1047
POWAY ADULT DAY HEALTH CARE CENTER.....1457		RAGUVEER, VISHAKA..... 506	REAL, MARIA..... 360, 431
POWAY HEALTHCARE CENTER..1448		RAHIMI, NASSRIN..... 1428	REARDON, JACQUELINE..... 675
POWELL, STEPHANIE.....569		RAHMATNEJAD, KAMRAN.871, 872, 1212	RECALDE, FRANCISCO..... 521
PRABHU, SUJATA.1548, 1577, 1607, 1622, 1650, 1651		RAJAEI, NILOUFAR.....1090	REDDY, ARJUN..... 372
PRASAD, AMITHA.....1471		RAJAGOPAL, AMUTHA..... 1144	REDDY, DANA..... 357, 591
PRATHER, ALLYSON.....1472		RAJAIPOUR, NEGIN.....626	REDDY, JOSEPH..... 1133
PRATT, STEVEN.....1590		RALEIGH, DEBORAH.....812	REDDY, NAVYA..... 753
PRESKILL, CATALINA.....570		RALL, EMILY.....582	REDDY, REDDIWANDLA..... 947
PRESTERA, TORY.....1393, 1657		RAMAMOORTHY, SONIA..... 931, 1354	REDDY, SMITHA..... 1048
PRIEST, VIVIAN.....1304		RAMERS, CHRISTIAN..... 529	REED, KRISTIE..... 917, 1486
PRIETO, ALEJANDRA..... 1387		RAMGREN, AILEEN.....461	REEG, JESSICA.....1533
PRINCE, RENEE.....1318, 1522		RAMIREZ SANCHEZ, CLAUDIA.634, 842, 1144, 1401	REGEV, SHANEE..... 360
PRITZKER, JOELY..... 1014, 1415		RAMIREZ, ALFREDO.....944	REID, CHRISTOPHER....750, 943, 1378
PROHASKA, THOMAS.....1060		RAMIREZ, CRISTHIAN.....506	REID, EMILY..... 361, 431, 478
PROMER, KATHERINE..631, 1144, 1401		RAMIREZ, NICOLE..... 817, 1102	REIFENBERGER, JODY.....463
PROPST, TOBE..... 506		RAMNATH, VENKTESH.....728	REIMERS, REBECCA.683, 757, 952, 974, 1021, 1135, 1164
PRUSS, ERIKA.....1040, 1372		RAMOS, CARLOS..... 858, 1175	RENDLER, NATHAN.....461
PUIG LLANO, MANUEL.....871, 1211	RAMOS, ELENA.....1038	REO VISTA HEALTHCARE CTR. 1451	
PUTRUS, RAMIZ..... 366	RAMOS, JACQUELYN.....721	RESELLI, LYNDSLEY..... 947, 948	
PYLE, ALEXANDRA.....1305	RANA, DEBORAH.....443	REVELES, DIANA.....354	
Q		REYNAGA, JOSUE..... 630	
QAYOUMI, WALI.860, 1187, 1485, 1486, 1523	RANASURIYA, DUNISHA..... 986, 1262	REYNOSO, ALFONSO.....325	
QUACH, PHUC.....1607	RANDLE, CARRIE.....1090	RHEE, KYUNG.....1292	
QUAN, MICHELE.....780	RAO, APARNA..... 988, 1282	RHOTEN, REX LLOYD.....749	
QUENZER, FAITH..... 675, 827	RAO, ROHIT.....1243	RIBEIRO CALDAS DOMINGUES, ISABEL.....1523	
QUEVEDO, JUAN.....1179	RAO, SOUMYA.....1047	RICE, ELIZABETH.....665	
QUICK, ELISABETH.....354, 582	RAO, USHA.....398	RICHARD, MARLA.1486, 1487, 1523, 1524	
QUILALANG, SUSAN.....323	RASHCOVSKY SCHIFF, KARIN..... 399	RICHARDSON, ALVIE.684, 735, 953, 1022, 1165	
QUINONES-PEREZ, BIANCA.771, 948, 1034, 1262	RASMUSSEN, DALE.....583	RICHARDSON, ANGELIQUE..... 838	
QUINTANA, PAULINA.....1235	RATNAYAKE, KRISTIN.....1262	RICHARDSON, DANIELLE.....436	
QUINTERO, CAROLYN.....608, 1394		RICHARDSON, HENRY.698, 774, 1037, 1295	
QUINTO, CINDY.....478			
QUIROZ, ELISA.....336			

M. Lista de médicos de atención primaria

RICHARDSON, JULIA.....	694	ROSADO, IVAN.....	507, 1128	SALAS, JESSICA.....	1049
RICKERTS, MATTHEW.....	1346	ROSCOE, SYDNEY.....	1091	SALAZAR, JUANITA.....	352
RIEDL, MARC.....	1051	ROSE, PATRICIA.....	651	SALEH, FAREED.....	1264
RIEGO, SUZANNE.....	1090	ROSENBAUM, HERBERT.....	627	SALEM, RAMSEY.....	366, 627
RIES, DAVID.....	1292	ROSENBLATT, EUGENE.....	332	SALERNO, MARIANA.....	635
RIGGINS, NINA.....	1188	ROSENBLATT, SHERI.....	385, 721, 1405	SALMASI, AMIRALI... 712, 714, 965, 1382	
RING, ROBERT.....	1028, 1625	ROSS, COLLIN.....	647	SAMI, REMAN.....	336, 678, 1400
RIOS, SIERRA.....	1472	ROSS, CRYSTAL.....	323, 1092	SAMPATH, SRIVIDYA.....	571
RISSER, JOSEPH.....	587, 1128	ROSSI, CATHERINE.....	813, 1092	SAMPSON, ANDRIECE.....	1093
RITCHIE, DAVID.....	922, 1333	ROUEL, LINDA.....	372	SAMUEL, MICHAEL.... 1567, 1577, 1608	
RITTER, STEVEN.....	507, 626	ROUEL, WADI.....	372, 440, 529	SAN DIEGO AMERICAN INDIAN HEALTH CENTER.....	139, 140
RIVAS, RENEE.....	867, 1201	ROUGH, STEVEN.....	681, 682, 1000	SAN DIEGO AMERICAN INDIAN HEALTH CENTER,	518
ROBERTS, AUDREY.....	909, 1305	ROWHANI, NAGHMEH.....	698	SAN DIEGO FAMILY CARE.228, 229, 231, 232, 1670	
ROBERTS, KENDALL.....	414	ROXAS, ROGER.....	675	SAN DIEGO FAMILY CARE,	518
ROBERTS, POMAI.....	436, 998	ROZO, JOSE.....	1092	SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE.....	1458
ROBERTSON, RACHAEL.....	1091	RUBENSTEIN, STUART.....	570	SAN DIEGO HEALTHCARE QUALITY COLLABORATIVE.....	1666
ROBINSON, COLE.....	751	RUBENSIK, TAMARA.733, 840, 1140, 1421		SAN DIEGO POST ACUTE CENTER.	1441
ROBINSON, DAISY.....	411, 788	RUDD, CHRISTOPHER. 927, 928, 1346		SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE.....	227, 229, 230
ROBINSON, DEAN.....	395, 1108	RUDOLF, FRANCES.....	726, 827, 1118	SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,	519
ROBLEDO, DAMIAN.....	1472	RUELAS, ROBERTO.....	644	SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE.....	19, 20, 21
ROCHE, CHELSEA.....	812	RUIZ, MONICA.....	1263	SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,	312
RODARTE, GABRIEL.... 399, 1472, 1477		RUNGIVATJARUS, TIRANUN.... 1292		SAN YSIDRO HEALTH CHC - OCEAN VIEW.....	139, 140, 141, 142, 152
RODENMEYER, EVE.....	1091	RUSSELL, SAMUEL.....	1034, 1263	SAN YSIDRO HEALTH CHC - OCEAN VIEW,	519
RODRIGUEZ JEREZ, ROBERTO.342, 378, 426, 549, 550, 655		RUSSO, KRISTA.321, 458, 459, 463, 612		SAN YSIDRO HEALTH CHULA VISTA. 27, 28, 29, 30, 31, 32, 33, 36, 37, 38, 39, 40, 41, 42, 43, 44	
RODRIGUEZ MARTINEZ, RENIL....491		RYAN, DANA.....	412, 790	SAN YSIDRO HEALTH CHULA VISTA,	336
RODRIGUEZ, ALDO.384, 570, 644, 1403		RYAN, KYLE.....	774, 990, 1037, 1295	SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED....	227, 230, 231
RODRIGUEZ, CASSANDRA.....	356	RYU, JULIE.....	1282	SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,	519
RODRIGUEZ, JAVIER.....	570	S			
RODRIGUEZ, SEAN.....	507	SABHA, MAHMOUD.....	828, 1118		
RODRIGUEZ-MINETTE, JESSICA.723, 1431		SABIN, NANCY.....	479, 1093		
ROGERS, MATTHEW.....	316, 665	SACHS, MELISSA.....	1489, 1524		
ROGERS, TANYA.....	479	SACKS, BRENT.....	817, 1102		
ROJAS, RICHARD.....	488	SADAT, SAYED.....	922, 1334		
ROJAS, STEVEN.....	626	SAEZ, NEIL.....	695, 957		
ROMA, ANDRES.....	898, 1235	SAFI, ROOZCHEHR.....	389, 600		
ROMERO, CAMILA.....	587, 588, 1309	SAH, SERENA.....	767, 982, 1243		
RONAN, KEVIN.....	453, 660	SAHAGIAN, MICHELLE.737, 760, 976, 1024, 1190			
RONCAROLO DE VRIES, ROXANE.	1014	SAHMS, TIMOTHY.....	645		
RONQUILLO, KAREN AN.....	366, 717	SAIDIAN, AVA.....	1382		
RONQUILLO, RINA.....	419	SAIDRO, LUZVIMINDA.....	316		
ROSA, ADAM.....	1625	SAIKHON, TALIA.....	910		
		SAJTI, ENIKO.....	858, 1175		
		SALAMANCA, OMAR.....	1020		

M. Lista de médicos de atención primaria

SAN YSIDRO HEALTH EL CAJON.66, 67, 68, 69, 70, 71	SANDERS, JESSICA..... 310	SCHWARTZ, KRISTY..... 1265
SAN YSIDRO HEALTH EL CAJON, .	SANDHU, BASANT..... 399	SCHWARTZEL, KEVIN. 910
..... 368	SANDLER, BRYAN..... 1362	SCHWARZ, KATHLEEN..... 1273
SAN YSIDRO HEALTH ESCONDIDO	SANDOC, EMILY..... 1651	SCHWEIKERT, SUZANNE. 605, 606
FAMILY MEDICINE..... 85, 86, 87	SANTANGELO, JOANNE.480, 1093, 1094	SCHWENDEMANN, WADE.953, 1022, 1165, 1166
SAN YSIDRO HEALTH ESCONDIDO	SANTIAGO, AMANDA..... 1014	SCOTT, JEFFREY..... 1560, 1608, 1622
FAMILY MEDICINE, 401	SANTIAGO, ROXANE..... 352	SCOTT, LAGINA..... 508, 1129
SAN YSIDRO HEALTH MATERNAL	SANTORELLI, JARRETT..... 934, 1363	SCOTT, RYLEE..... 507
AND CHILD HEALTH CTR.278, 279, 280, 281, 282, 283, 284, 285	SANTOS CAVAIOLA, TRICIA. .831, 1122	SCOTT-WYARD, PHOEBE. 991, 1296
SAN YSIDRO HEALTH MATERNAL	SAPRA, SONIA.342, 378, 427, 550, 551, 655	SCOVILL, ALEXANDRA..... 694, 1553
AND CHILD HEALTH CTR, 629	SASSIC, JESSICA..... 529	SCRIPPS GREEN HOSPITAL..... 1435
SAN YSIDRO HEALTH MOUNTAIN	SATTERFIELD, KELLIE..... 872, 1212	SCRIPPS MEMORIAL HOSPITAL. 1435
HEALTH FAMILY MEDICINE..... 23, 24	SATTERWHITE, MAURINE.480, 481, 1094	SCRIPPS MEMORIAL HOSPITAL ENCINITAS..... 1436
SAN YSIDRO HEALTH MOUNTAIN	SAUER, CHARLES.736, 758, 858, 859, 1045, 1176	SCRIPPS MERCY HOSPITAL..... 1436
HEALTH FAMILY MEDICINE, 317	SAVILLE, EDITH..... 481	SCRIPPS MERCY HOSPITAL CHULA VISTA..... 1436
SAN YSIDRO HEALTH NATIONAL	SAWHNEY, NAVINDER..... 756	SEAMAN, MARY..... 481
CITY..... 119, 122, 123, 124	SAWYER, CAROLYN..... 1524, 1525	SEARLEMAN, ADAM. 923, 1335
SAN YSIDRO HEALTH NATIONAL	SCHAEPE, RHODORA..... 659	SEARS-WILEY, ELIZABETH..... 1094
CITY, 438	SHELLINGER, KRISTON.1318, 1319, 1525	SEAVEY, MICHELLE..... 720
SAN YSIDRO HEALTH PARADISE	SCHIEDERMAYER, BENJAMIN.930, 1352	SEBASKY, MEGHAN..... 847, 848, 1151
HILLS..... 120, 121, 122, 125, 126	SCHLOSSER, TARA..... 1526	SEBIANE, MARIA..... 608, 609
SAN YSIDRO HEALTH PARADISE	SCHMIDT, BRYAN..... 590	SEBRING, JAN..... 482
HILLS, 438	SCHMITT, EVA..... 1305	SEBSO, JODI..... 571
SAN YSIDRO HEALTH SAN YSIDRO	SCHNEEBERGER, ANDRES..... 1487	SEFA-BOAKYE, KOFI..... 342, 641
HEALTH CENTER.260, 261, 262, 267, 268, 269, 270, 271, 272, 274, 275, 276, 277, 278, 285, 286, 287, 288, 289, 290, 291, 292	SCHNEIDER, SARAH..... 355, 585	SEILNACHT-BERNARD, KAREN... 753
SAN YSIDRO HEALTH SAN YSIDRO	SCHNEIDER-MUNOZ, MARGARITA. 635	SEITZ, GRETCHEN..... 1064
HEALTH CENTER, 630	SCHNICKEL, GABRIEL..... 1380	SELBY, BLAKE..... 1095
SAN YSIDRO HEALTH SOUTH BAY.	SCHONBACH, ETIENNE..... 872	SELECT SPECIALTY HOSPITAL SAN DIEGO..... 1436
..... 114, 115	SCHORR, EMILY..... 737, 1188	SELTZER, JUSTIN..... 828
SAN YSIDRO HEALTH SOUTH BAY, .	SCHROEDER, JENNIFER... 1305, 1306	SENA, TIFFANY..... 1095
..... 439	SCHROEDER, MARY..... 1017	SERENE HEALTH..... 1669
SAN YSIDRO HLTH SAN DIEGO PACE	SCHROTER, STEPHANIE..... 986, 1264	SERIO, TAYLOR..... 1526
SENIOR HLTH SVS.262, 263, 264, 265, 266, 273, 274	SCHULTE, JESSICA..... 861	SERPAS, SHAILA..... 332
SAN YSIDRO HLTH SAN DIEGO PACE	SCHULTZ, HEATHER..... 923, 1334	SERRY, ROD..... 751, 756, 1045
SENIOR HLTH SVS, 630	SCHULTZ, JAMES..... 399, 400, 657	SHABAIK, AHMED..... 898, 1235
SANACORA, RACHEL..... 1035, 1264	SCHULZ, STEFAN..... 1306	SHAFFER, KATHERINE..... 678, 1134
SANCHEZ, ADRIANA..... 1498, 1543	SCHUMAKER, EDWARD.367, 436, 507	SHAH, MEERA..... 414
SANCHEZ, MICHAEL..... 910	SCHWAB, GARY..... 1215	SHAH, MITA..... 1179
SANCHEZ, MYRNA..... 617		SHAH, NEMI..... 739, 1201
		SHAH, SHAILJA..... 835, 1134
		SHAHATTO, LOBNA..... 1151

M. Lista de médicos de atención primaria

SHAHBAZ, LINNAE.....	1015, 1415	SHULKIN, MITCHELL.....	1651	SOSA, DAVID.....	362, 363, 488, 489
SHAHIDYAZDANI, TINA.....	645	SHUMILAK, KAILI.....	509	SOUDER, CHRISTOPHER.....	986, 1265, 1266
SHAHTAJI, ALAN.....	333, 627	SICKLES, MAGGIE.....	323	SOUMEKH, MASSOUD.....	1366
SHANNON, KELLI.....	1166	SIETSMA, ALEXANDRA.....	1310	SOUTH BAY POST ACUTE CARE.....	1439
SHAPIRO, HILARY.....	800	SIEVERING, DENISE.....	925, 1341	SOUTHBAY URGENT CARE INC.....	1715
SHARIF TABRIZI, AHMAD.....	861, 1191	SILVA SEPULVEDA, JOSE.....	664, 744, 767, 983, 1243	SOZANSKI, JESSE.....	1320
SHARP CHULA VISTA MED CTR.....	1437	SILVEY, CHRISTOPHER.....	1489, 1527	SPARKS, TODD.....	707, 792, 1006
SHARP CORONADO HOSP AND HEALTHCARE CTR.....	1437	SIMPSON, ERIC.....	1397, 1533	SPEH, BRIAN.....	911, 1306
SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS.....	1437	SINGH, GAURAV.....	1110	SPENCE, JAMIE.....	613
SHARP MEMORIAL HOSPITAL.....	1437	SINGH, PUJA.....	987, 1271	SPENGLER, NATHAN.....	923, 1336
SHARP, LORRA.....	784	SINGH, RAMENDEEP.....	415	SPEZIALE, MARK.....	686, 1177
SHARPE, NORMA.....	313, 317, 407, 583, 647	SKAF, AYHAM.....	345, 381, 641	SPITZER, MARSHA.....	572, 573
SHAUL, SHERA.....	910, 911, 1306	SKALSKY, ANDREW.....	991, 1296	SREJIC, UNA.....	1055
SHAW, BLAKE.....	556	SKAY, RICHARD.....	1658	SRIDHAR, SUNITA.....	1276
SHAW, SUSANNA.....	797, 1054	SKINNER, NICOLE.....	928, 1346	SRILASAK, MICHELE.....	732, 813, 1415
SHEETS, ROBERT.....	1283	SLATER, JERRY.....	923, 1335	ST PAULS HEALTH CARE CENTER.....	1451
SHEIKH MOHAMED, AMIRA.....	635	SLEIMAN, JOSEPH.....	428	ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER.....	232, 233, 234, 235, 236
SHEIKH, ZARA.....	508	SLOAN, ERICA.....	714	ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER.....	519
SHEIKH-MOHAMED, HALA.....	373	SLOANE, CHRISTIAN.....	1119	STABEN, REBECCA.....	343, 379, 427, 552, 655
SHEILS, CATHERINE.....	764, 872, 873, 1026, 1212, 1213	SLOAN, CHRISTIAN.....	1119	STAHL, KEVIN.....	708
SHENOY, ASHVIN.....	571	SMILDE, RENEE.....	530	STALEY, MICHAELA.....	628
SHERER, KIMBERLY.....	1265	SMITH, CASEY.....	828	STALLINGS, ANDREA.....	1306
SHEREV, DIMITRI.....	682, 719, 947, 1159	SMITH, CHELSEY.....	848, 1152	STANFORD COURT SKILLED NURSING AND REHAB CENTER.....	1452
SHERMAN HEIGHTS FAMILY HLTH CTRS INC.....	166, 167	SMITH, DOUGLAS.....	647	STEINBERG, LEONARD.....	1244
SHERMAN HEIGHTS FAMILY HLTH CTRS INC.....	519	SMITH, EMILY.....	869	STENSMAN, LARS.....	312
SHETABI, KAMBIZ.....	532	SMITH, KELLI.....	788, 968	STEPHENS, LAURA.....	1236
SHETH, HASMUKH.....	353, 572	SMITH, SHARON.....	361, 421, 422	STEPHENSON, SAMUEL.....	935, 936, 1364
SHETH, SARIKA.....	986, 1265	SMITH, SONYA.....	1498, 1499, 1543	STEVENSON, REHEIA.....	813, 971
SHI, RUJING.....	530	SMOOT, CHARLES.....	509	STEWART, TYLER.....	839
SHI, VERONICA.....	1110	SNOOK, BRIAN.....	437	STOJANOVSKA, JOVANA.....	786
SHIAU, NANCY.....	572	SNYDER, CHRISTOPHER.....	509, 627	STONE, CALVIN.....	1473
SHIELDS, SEBASTIAN.....	1462	SNYDER, MICHELLE.....	971	STONES, RACHEL.....	437
SHIMIZU, KELSIE MIDORI.....	667	SOCHA, TRACI.....	609	STOVER, LAURIE.....	1293
SHINDO, YURI.....	841, 1141	SOLIS, KEVIN.....	1554, 1651, 1652, 1661	STRAKA, CHRISTOPHER.....	1336
SHIRAKI, JEAN.....	508	SOLORIO JR, ROBERTO.....	1527, 1533	STRAZICICH, KARLA.....	406
SHORT, ABIADE.....	343, 641	SOMERSET SUBACUTE AND CARE.....	1441	STREET, KYLE.....	1473, 1500
SHORT, RICHARD.....	419	SONG, CAROL.....	1408	STRINGER, JESSE.....	1244
SHU, I WEI.....	1526	SONG, DELU.....	873, 1026, 1213		
SHUCKETT, ARIEL.....	551, 1201	SONG, JOYCE.....	406		
		SONG, RICHARD.....	1176, 1292		
		SONG, WEI.....	1235		
		SOPHY, ELIZABETH.....	510		
		SORIA LOPEZ, JOSE.....	690, 1391		
		SORIA, CLAIRE.....	797, 1054		

M. Lista de médicos de atención primaria

STUMP, CHARI.....	573	TAM, EMILY.966, 1028, 1029, 1426,	THE VILLAS AT POWAY.....	1448
SU, VENNES.....	489	1427	THIESSEN, KAREN.....	1528
SUAREZ, ROBERTO.....	1527	TAM, MAY.....	THIRUNAGARI, HARRSHA.....	406
SUBRAMANIAN, RAMA.....	573	TAMAS, VANESSA.....	THOMAS, PAULA.....	1474
SUDHAKAR, DEEPTHI.682, 683, 720,		TAMAYO, MAITHE.....	THOMAS, ROBERT.....	1153
757, 1159, 1160, 1390, 1391		TANAKA, HIDEAKI.....	THOMAS, THEODORE.....	1180
SUGGS, SARAH.....	792, 793, 1006	TANAKA, MARY.....	THOMAS, ZACHARY.....	511
SULEIMAN QAFITI, KHAWLA.....	573	TANG, ANDREW.....	THOMPSON, CHERYL.....	400
SULLIVAN, ELISSA.....	645	TANG, MICHAEL.....	THOMPSON, COLE.....	924, 1338
SULLIVAN, THOMAS.....	942, 1372	TANTISIRA, KELAN.....	THOMSON, SAMANTHA.....	868, 1202
SUMMERS-DAY, COURTNEY.510,		TANTISIRA, LALITA.....	THYGERSEN, ALAYSA.....	789
790, 1129		TANTOD, KULIN.....	TILLMAN, SYLVIA.....	1608, 1653
SUNA SITTO, MOHEEN.....	648	TARLE, STEPHANIE.917, 1319, 1487,	TILTON, PETER.....	1528
SUOZZO, JOSEPH.....	779, 1473	1527	TIMBERMAN, SARAH.....	1096
SUPAT, BENJAMIN.....	828	TARVER, LESLIE.....	TIZNADO, MONICA.....	1474
SURI, RAJAT.....	992, 1432	TAUB, PAM.....	TO, TUAN.....	1319, 1528, 1529
SUSAN PARHAM HOUSING		TAYLOR, CHRISTOPHER.786, 1015,	TODD, MIKAYLA.....	310, 394, 482
CORPORATION.....	1455	1016, 1416	TODD, SARAH.....	772, 1035, 1266
SUTTNER, DENISE.....	758, 1177, 1293	TAYLOR, DAVID.....	TOLBA, KAMEI.....	393
SUTTON, BRIAN.....	747	TAYLOR, DAVID.....	TOLEDO-NADER, CAROLL.....	334
SUYAMA, JULIE.....	868, 1202	TAYLOR, KAYLA.....	TOLENTINO, ARTURO.....	1389
SUYDAM, STEVEN.....	797, 1055	TAYLOR, MARIO.....	TOMASZEWSKI, DEBRA.....	583
SWARTZ, ERIN.....	1095	TAYLOR, TASHA.....	TOMLIN, JEFFREY.....	1366
SWARTZ, JOHN.....	333, 510	TCHAKMAKJIAN, LEVON.....	TON-NU, MY LINH.1549, 1561, 1568,	
SWEAT, MARIE.....	1189	TEE, ALEXANDRA.....	1578, 1590, 1608, 1609, 1622, 1623, 1654	
SWEENEY, DANIEL.....	727	TEETER-WITT, ALYSSA. 779, 1473, 1474	TONG, ALEXANDER.....	842, 1141
SWEENEY, NATHALY.....	759, 1178	TEJEDA, FRANCISCO.....	TONG, GARRICK.....	1534
SWEET, JASON.....	1336	TELLECHEA-SANCHEZ, SELMIRA.	TONJES, ERIKA.....	1096, 1097
SWEET, PATRICK.....	628	.....	TONNU, ANH.....	1561, 1591, 1609, 1654
SWEIGERT, JAMIE.....	1527	.....	TOPILOW, NICOLE.....	873
SWORDS, KELLY.....	1383	TEW, JOHN.....	TOPPEN, LAURA.....	813, 814, 1097
SY, RAMON.....	635, 1402	THACH, TERILYN.....	TORRES, HECTOR.....	1397, 1534
SYED-UDDIN, SUMIYAH.....	987	THAI, AMANDA.....	TORRES, JOANN.....	649, 1404
		THAI, JUSTIN.....	TOTH, JESSICA.....	422
		THANGARAJAH, HARIHARAN.664,	TOUBIA, ELIAS.....	1554, 1623, 1661
		994, 1376	TOVAR PADUA, LEIDY.....	1145
		THAPER, MOHINDERPAL.....	TOWNSEND, LAURIE.....	511
		1044	TRAN, ALEXANDER.....	1578, 1655
		THE BRADLEY COURT.....	TRAN, HENRY.....	1609
		1441	TRAN, JESSICA.694, 1029, 1030, 1427,	
		THE COVE AT LA JOLLA.....	1428	
		1444	TRAN, KELLY.....	483
		THE DORTHY AND JOSEPH	TRAN, LINH.728, 851, 972, 973, 1157,	
		GOLGBERG HEALTHCARE CENTER.	1432	
		.....	TRAN, MICHAEL.....	1659
		1442		
		THE PAVILION AT OCEAN POINT.1451		
		THE SPRINGS AT PACIFIC REGENT.		
			
		1451		

T

TA, MINI.....	1658			
TA, TRANG.....	1652			
TABAREZ, NORMA.....	724			
TADDONIO, MICHAEL.....	924, 1337			
TADROS, ANTHONY.....	924, 1338			
TAGHIZADEH, BEHZAD.....	951			
TAHRIRI, BAHAREH.....	613, 614			
TAI, KUANGKAI.....	462			
TAING, JENNIFER.....	1096			
TALAVERA, GREGORY.....	333, 628			
TALBOT, ADRIANNE.....	1096			

M. Lista de médicos de atención primaria

TRAN, THAO.....	1663	UPASANI, VIDYADHAR.994, 1040,	VELASQUEZ, FERNANDO.	483, 484
TRAN, THERESA.....	987, 1267	1373	VELASQUEZ, SHARON.334, 437, 629,	
TRAN, TONNIA.....	511	URIBE-BRUCE, LILIANA.....	677	
TRAN, TU-UYEN.....	656	UTZ, JACK.....	629	VELAZQUEZ CAMARENA, MARIA.
TRANG, CHAU.....	1655	UWEDJOJEVWE, LETICIA.....	338	..... 338, 636
TRAUT, JOEL.....	1267	UY, ASHLEY.....	363	VELLORE GOVARDHAN, SHILPA.1244
TREJO, RAUL.....	334, 628	UY, CARMELITA.....	443	VENKATESH, VIJAY.....
TRI CITY MEDICAL CTR.....	1437			964, 1405
TRIMM, CASSIDY.....	928, 929	V		VENNAM, VAMSI.....
TRIVEDI, SURAJ.....	797, 1055	VAHABZADEH-HAGH, ANDREW.889,		1475
TROYER, EMILY.....	1463, 1529	890, 1229, 1230		VENTRO, GEORGE.....
TRUECARE.24, 25, 26, 82, 83, 84, 85,		VAHDAT, VALERIE.....	1387	932, 1355
126, 128, 129, 130, 131, 132, 133, 251, 252,		VAHDOT, NOUSHIN.....	925, 1339	VERDUZCO GONZALEZ, AURORA.
253, 254, 255, 256, 257, 258, 259, 260		VAIDYA, KAMALA. 698, 772, 1035, 1268		..... 361, 431
TRUECARE, .318, 390, 451, 462, 601,		VAKILIAN, SIAVOSH.....	781, 1339, 1340	VERRET, ERIC.....
602		VALDEZ, KRYSTAL.....	530, 1123	1578
TRUJILLO, DALE.....	814	VALENCIA, MARILES.....	353, 444	VETTICADEN, SANTOSH.....
TRUJILLO, JENNIFER...343, 553, 1203		VALENZUELA, TRICIA.....	512	403
TRUJILLO, MIGUEL.....	648	VALLE VISTA POST ACUTE.....	1443	VIA RIO HOUSE.....
TRUONG, NHA.....	511	VALLEZ-BARLAM, ANDREA.779, 780,		1444
TSAI, MATTHEW.....	835, 1134	1047, 1474, 1475, 1501		VIBAL-POASTER, MARIA.....
TSUCHIYA, KIMIKO.....	512	VAN DYKE, JASON.....	590	1097
TSUDA, PAIGE.....	798, 1056	VAN HOLLEBEKE, RACHEL...312, 629		VICTORIA POST ACUTE CARE.1441,
TSUI, NANCY.....	1610	VAN HOOSE, MARC.....	1656	1442
TU, BEVERLY.....	1610	VAN PRATT LEVIN, AISHA.....	1400	VIDAL, MONICA.450, 451, 1020, 1420,
TU, CHARLES.....	1655	VAN PRATT LEVIN, BENJAMIN. ...1129		1421
TUEROS, VICTORIA.....	483	VAN WOY, LAUREN.....	1268	VIDAURAZAGA, MONICA.....
TULLY, JEFFREY.....	798, 1056	VANDEWIELE, EMILY.....	1347	531
TUNG, VIVIAN.....	414	VANE, JACKSON.....	1268	VIDEEN, JOHN.....
TURNER, ELIZABETH.....	1097	VANETSKY, GARY.....	747	688
TURNER, SHEREENA.....	386, 583	VANFOSSEN, BRIAN.....	1320, 1529	VIERLING, SABRINA.....
TZENG, ERIC.....	798, 1056	VAQUERO, JUANA.....	780, 1475	1320, 1530
		VARGAS TRUJILLO, MARCELA.989,		VILLA CORONADO CONVALESCENT.
		1272		..... 1439
U		VARGAS, CHRISTOPHER.....	700	VILLA LAS PALMAS HEALTHCARE
U, HOI.....	938, 1367	VARGAS, JACLYN.....	959, 1036, 1269	CTR.....
UCSD LA JOLLA JOHN SALLY		VASQUEZ, BENJAMIN.....	929, 1347	1442
THORNTON.....	1438	VAUGHN, GABRIELLE.....	1244	VILLA RANCHO BERNARDO CARE
UCSD MEDICAL CTR.....	1438	VAVINSKAYA, VERA.....	898, 1236	CENTER.....
UCSD MEDICAL GROUP,.....	532, 533	VAWTER, ERIN.....	961	1451
UDOH, EKAETE.....	584	VAYNGORTIN, TATYANA.....	1269	VILLA, ANGELICA.....
ULRICH, STACEY.....	1267	VAZQUEZ-ERLBECK, MARTHA.	617	1554
UNGER, LINDSEY.....	930, 1352	VCC DURIAN.....	301	VILLA, MARIA.....
UNIVERSITY CARE CENTER.....	1451	VCC DURIAN, .	660	512
UNSDORFER, KYLE.....	924, 1339	VEGA, SARAH.....	1293, 1294	VILLALOBOS, REBECA.....
UNTERBERG, STEPHEN.	1383, 1384	VEGA, TERESA.....	324, 483	484, 1098
				VILLANUEVA DE GUTIE, BERENICE.
				..... 362, 431
				VILLANUEVA, GIOVANNI.708, 793,
				1006
				VINCENT, BERLIN.....
				1103
				VINCENT, LAUREN.....
				326
				VINH, JOHN.1561, 1568, 1591, 1610,
				1623
				VISTA COMMUNITY CLINIC.100, 126,
				127, 128, 302, 303, 304, 305, 306, 307,
				308, 309, 1680
				VISTA COMMUNITY CLINIC
				GRAPEVINE.....
				299, 300, 301

M. Lista de médicos de atención primaria

VISTA COMMUNITY CLINIC GRAPEVINE,	660	WATTS, ELI.....	532	WILLIAMS, TAKISHA.324, 362, 422,	484, 485, 650
VISTA COMMUNITY CLINIC HORNE STREET.....	133, 134, 135	WEATHERLY, JACOB.....	575	WILLIE, KADEN.....	390, 600, 601
VISTA COMMUNITY CLINIC HORNE STREET,	452	WEAVER, AMANDA.....	1466	WILSON, CARLENE.....	1499, 1544
VISTA COMMUNITY CLINIC PIER VIEW WAY.....	128	WEAVER, APRIL.....	663	WINDHAM, SUZONNE.1016, 1416, 1417	
VISTA COMMUNITY CLINIC PIER VIEW WAY,	452	WEAVER, JESSICA.932, 992, 1355,	1433	WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL.....	1452
VISTA COMMUNITY CLINIC, . .	410, 451	WEBB, SHANNON.....	1308	WINDSOR GARDENS CONV CTR OF SAN DIEGO.....	1447
VISTA HEALTHCARE CENTER.	1455	WEBSTER, LUKE.....	1153	WINE, DAVID.....	460
VISTA HOUSE.....	1455	WEICKERT, MARIA.....	484	WINESBURG, JENNIFER.343, 379,	427, 553, 554, 656, 1002
VISTA KNOLL SPECIALIZED CARE FACILITY.....	1455	WEINSTEIN, GEOFFREY.703, 781, 963,	1325	WINKLER, GARRET.....	829
VIVIRITO, MARY.1549, 1568, 1578, 1591,	1610, 1611, 1624, 1656	WEIR, JACQUELINE.....	912, 1308	WISHNEK, HANNAH.....	1487
VO, ANDREW.....	875, 1215	WEISS, KATHERINE.....	975, 1179, 1294	WITCZAK, IZABELA.....	602, 603
VO, ANDREW MINH... 1591, 1592, 1656		WEISSBROD, PHILIP.....	891, 892, 1231	WOELKERS, DOUGLAS.....	735, 855
VO, PHU LUONG.....	1129	WEISSMAN, CORY.....	1530	WOLF, CELIA.....	485
VOLLER, STEPHANNIE.....	1178	WELLS, TODD.....	1049	WOLF, RICHARD.....	735, 855, 1168
VOLPP, PAUL.....	703, 781, 963, 1324	WEN, AKI YEN CHANG.....	338, 636	WOLFE, AMANDA.....	1042
VU, PETER.....	839, 1138	WERHO, DAVID.....	1245	WONG, RICHARD.....	894, 1233
VU, WENDY.....	411	WERNER, R AARON.....	1561	WONG, SHARON.....	1611
W		WERNER, REX.....	1562	WONG, VICTOR.....	1276
WAHLIN, TAMARA.....	911, 912, 1307	WEST, JULIE.....	975, 1045, 1179	WONG, YOLANDA.....	575
WALDRUP, LA'RHONDA.....	753, 1098	WESTERMANN, MELISSA.684, 1022,	1166, 1167	WOO, ANDY.....	1099
WALKER, JULIE.....	1347	WESTERN ADHC.....	1456	WOODWORTH, JENNIFER.780, 1407,	1475
WALLACE, STEPHANIE.....	1428	WETTERSTEN, NICHOLAS.....	853, 973	WRIGHT, DEREK..700, 777, 1038, 1309	
WALSH, JOHN.....	777	WHEELER, KIM.....	722, 1466	WRIGHT, KIMBERLY.....	1043
WANG, ANGELA.....	848, 1153	WHITE, KATHERINE.....	512	WU, EVA.....	1624
WANG, DEHUA.....	1236	WHITE, KERI.....	1043	WU, JENNIFER.....	513
WANG, EMILY.....	773, 959, 1036, 1270	WHITE, KYLE.....	962	WU, MICHELLE.....	1530
WANG, HUAN YOU.....	839, 1139	WHITEHURST, UNIQUE.....	1098	WYLIE, BLAKE.....	312
WANG, LUKE.....	946, 1384	WHITLEY, NICHOLAS.....	335	Y	
WANG, MICHELLE.....	798	WIENER, GREGORY.....	678	YADLAPATI, RENA.....	849
WANG, REGINA.....	512	WIJAYARATNE, IMANIE.....	702, 1463	YAGUDAYEVA, RAISA.....	1530
WANG, YVETTE.....	1270	WILAND, WINONA.....	667	YAMADA, KENTARO.....	1213
WARD, KATHERINE.....	415, 419	WILCOX, WENONAH.....	670	YAN, CAROL.....	892, 893, 1231, 1232
WARDI, GABRIEL.....	729	WILE, KIMBERLY.....	777	YANG, JENNIFER.....	1189
WASSON, MINA.....	574	WILLIAMS, BREAHA.....	362, 432, 485	YANG, JENNY.....	849, 1154
WASTILA, LISA.....	531	WILLIAMS, JESSICA.....	591	YAO, CATHERINE.....	353
WATERS, ELIZABETH.....	574	WILLIAMS, JINA.....	659	YAPHOCKUN, KAREN.....	1271
WATSON, DEBORAH... 890, 891, 1230		WILLIAMS, KRISTIN.953, 1023, 1167,	1168	YCASAS, EMILY.....	1418
WATTANAMANO, PORNTHEP.....	531	WILLIAMS, MATTHEW.....	983, 1245	YEANG, CALVIN.....	1060
		WILLIAMS, SHANTRICE.....	716	YELLEN, LAURENCE.....	951
		WILLIAMS, STACY.....	929, 1347, 1348	YEO, ALEXANDRIA.....	732, 814, 1099

M. Lista de médicos de atención primaria

YIDI, DIANA.....	1531	ZIEG, ALAN.344, 379, 427, 554, 555,	
YODER, ANDREA	799, 1056	656	
YOON, RYAN.....	335	ZIMBRIC, MICHAEL.....	760, 1189
YORK, VINCENT.....	925, 1340	ZIMMERMAN, JENNIFER.....	1531
YOSHII-CONTRERAS, JUNE.....	666	ZINK, IRENE.....	513
YOU, ALAN.....	829, 1119	ZLATAR, ZVINKA.....	917, 1488
YOUNAN, LAWRENCE.....	799, 1057	ZU, KAI.....	950
YOUNG, ALLA.....	1555, 1611	ZUREK, BEDEANIA.....	1477
YOUNG, JENNIFER.....	317, 318	ZVANUT, DONALD.1562, 1569, 1579,	
YOUNG, JOCELYN.....	744, 1274	1593, 1611, 1612, 1624	
YOUNG-PEN, TONI.....	584		
YOUNOSZAI, ADEL.....	1245		
YOUSEF, ANDREW.....	557		
YOUSSEF, FADY.....	836, 1134, 1135		
YU, AUDRINE.....	930		
YU, CAROL ...	875, 876, 1216, 1592, 1656		
YU, ELAINE.....	829, 830, 1119		
YU, HELENA.....	1277		
YU, JENNIFER.....	1277		
YUAN, HENRY.....	689		
YUNG, DORIS.....	463		

Z

ZABLIT, KARIM.....	556
ZAGE, PETER.....	1277
ZAHEER, AARON.....	576
ZAHLER, MARVIN.....	513
ZAIDI, NOORINA.....	1579
ZAKOV, KAMEN.....	1042
ZAMBRANA, GEORGE.....	386
ZAMPELLO, LISA.....	409
ZANDER, ASHLEY.....	945
ZANDKARIMI, FARIBA.....	407, 576
ZANGEN, ROCHELLE.....	463
ZARE, SOMAYE.....	898, 899
ZARGAR, SHABNAM.....	353
ZAYAS, MARIO.....	1531
ZAYED, AHMAD.....	373
ZECHA, RONALD.....	395
ZELAC, DANIEL.....	313
ZHANG, HAIYAN.....	899
ZHANG, SHERRY.....	850, 1154
ZHAO, TAILUN.1562, 1568, 1579, 1592,	
1657	
ZHONG, YAN.....	1180
ZHOU, JENNY.....	1139

Notes

Notes

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